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GLASGOW SOUTHERN  
MEDICAL SOCIETY  
No 4.

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to 1892-1893 -*



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Meeting #11

11 Bridge St. Glasgow

27<sup>th</sup> March 1890.

Met the Glasgow Southern Medical Society.

Chairman

The President, Dr Pollok, in the Chair.

Sederunt

Sederunt:- Dr Pollok, Couper, Hamilton, Erskine, M'Murray, A.S. Trindal, A. Rankin, Carr, J.W. Cameron, McVail, Kennedy, J. M'Millan, Gilmore, John Brown, C.B. Robertson, M'Millan, Dewar, Napier, Macpherson, Robb, Black, & A. Miller members with Dr J. Lewis Paterson a visitor. 23 in all.

Adoption of Minutes

Minutes of meeting held on the 13<sup>th</sup> inst. were read & adopted.

Letter of resignation

from Dr A. Campbell

Clark

Bothwell

Secretary read letter from Dr A. Campbell Clark, Kirklands, Ayrshire Bothwell, enclosing his subscription for the year & resigning membership. Secretary was instructed to write to Dr Clark asking him to allow himself to be proposed as a corresponding member.

Removal of Dr

A.S. J. Douglas Reid

to

Port Glasgow.

Secretary also mentioned that Dr A.S. J. Douglas Reid has evidently removed from Portbridge, and asked if any of the members present knew anything of his whereabouts & was informed that he had gone to Port Glasgow.

In the absence of Dr. M'Millan - who was first on

Dr D. Dougall

the billit - the President called on Dr Dougall to read his

"Administration

of Iodine versus

Iodide of Potassium"

paper - viz. "On the administration of Iodine versus Iodide of Potassium". Dr. Dougall, after mentioning the dose of free Iodine at from  $\frac{1}{8}$  to  $\frac{1}{2}$  grain given as Fr. as stated in all works on Materia Medica and Therapeutics while that of K.I. ranged from 2 to 240 grs as the maximum dose, went on to state that most writers seem to agree that whether



Dr. Dougall's paper the one or the other is given, the effects on the system are the same.  
on Administration Admitting this, it is obvious that there would be a great saving  
of Iodine versus Iodide in the administration of K.I. Any objections to the giving of Iodine  
of Potassium seem more based on its irritating properties than on the  
smallness of the dose. Dr. D. then spoke as to the conversion  
of I. in the blood into Iodides and Iodates, &c. and to its being  
easily detected in the urine. Whereas in the case of K.I.  
no such chemical combination takes place, but rather that it  
is not decomposed in the system - as shewn by the fact  
that almost the entire quantity may be recovered from the urine.  
Dr. D. concluded by saying that it seemed that the administration  
of small doses of I. is, in every view, preferable to that of large  
doses of K.I. He advised the giving of I. in the form of Tinct.  
and that of about 10 min. =  $\frac{1}{4}$  gr of pure I. in a mixture of  
Aq. Chloroformi, Glycerine, or Syr. Solum. But he considers  
milk the best substance in which to give it. 10 drops in  $\mathcal{E}$ p.

### Discussion

The paper called forth a very full and free discussion  
by those present.

Dr. Hamilton would have liked to have heard from Dr.  
Dougall what was his experience in the way of results after  
treatment with Iodine say, in Syphilis as distinguished  
from those obtained from Iodide of Potassium.

Dr. D. C. McVail said he had taken some interest in  
this subject and wanted to know what a distinguished  
teacher had to say about it. He was sorry that Dr. D.  
had not communicated any of his own experience.



## Discussion

He - (Dr McVail) thought it was rather a big assumption to say that Iodide of Potassium only acted in virtue of the Iodine it contained. It goes into the system as  $KI$  and comes out of it the same salt. If the drug was decomposed in the system, one would expect that the resulting effects would be due to the free Iodine. On the other hand, Iodine, when it goes into the system does not come out as free Iodine. Before it reaches the blood it is represented as an Iodide. Iodide of Sodium and Ammonium have a much larger proportion of Iodine in their composition than Iodide of Potassium; and as for Hydriodic Acid you have a combination composed almost entirely of free Iodine, and the question is, Have we any cures of Syphilis by these drugs? He himself has had no Hydriodic Acid in Syphilis and he believed that Iodide of Potassium acted better than either the Iodide of Sodium or Ammonium in Syphilis.

Dr Erskine would have liked to have heard of Dr Douglass' practical experience in the administration of free Iodine.

Dr Gibbons could speak from personal experience of the administration of Iodine in milk, it was very far indeed from being as described, bland. He would be inclined to attribute the disappearance of the color of Iodine in milk to its volatility.

Dr Napier had a decided preference for the alkaline Iodides, except in those cases in which he wished to influence living structures, when he gave metathetic Iodine.



Discussion on  
Dr Dougall's  
paper.

Dr Pallof was afraid it was too much to assume that Iodide of Potassium owed its virtues to the Iodine it contained. He believed, however, that the Potassium had a mitigating effect upon the Iodine, as the effects of large doses of K.I. are not so severe as if it was administered as free Iodine.

Dr McMillan said that when Iodine was first discovered it was administered in large doses, & he remembered a case in which a drachm was given without any untoward effects.

Dr Dougall replied & said that Iodine was held by all authorities to have identically the same action as Iodide of Potassium. He believed it was not used on account of its irritating action. He had given free Iodine frequently.

Motion by.

Dr McMillan.

Dr McMillan then spoke to his motion in a few sentences, and concluded by moving "That a Committee be appointed to make up a complete history, with a view to publication, of the origin of the Victoria Infirmary." This was seconded by Dr Filmer.

Amendment by

Dr Hamilton

Dr Hamilton moved the previous question which was seconded by Dr Couper.

Adjournment of  
Discussion  
Moved &c

After several members had spoken, the Secretary moved that the discussion be adjourned, which was seconded by Dr Napier.



Dr Brown's motion Dr John Brown moved that the discussion proceed - this was seconded by Dr Dougall.

On Dr Brown's amendment being put against the motion of the Secretary, it was found that nine votes were given for each.

The President gave his casting vote in favour of Dr Brown's amendment. The discussion then proceeded and was taken part in by Dr Erskine, Dougall, Napier, & Brown. Dr Selmon wished to speak on the merits of the case but was disallowed after

withdrawal of which Dr McWilliam rose and, after a few remarks regarding Motion by the reception of his motion, withdrew it.

Dr McWilliam. Dr McWilliam's motion was therefore departed from.

On account of the lateness of the hour, it was agreed to postpone the reading of Dr Napier's paper till next meeting. The Society thereafter adjourned.

Robt. S. P. 11



# Meeting XII

11 Bridge St, Glasgow  
10 April, 1890

Met the Glasgow Southern Medical Society  
Dr. E. McMillan in the chair.

Chairman.

Sederunt.

Sederunt; - Dr. McMillan, Hamilton, Carr, Macpherson,  
Dewar, Kennedy, Robertson, Selmon, Dougall, Napier,  
John Brown & Miller 12 in all.

Adoption of minutes The minutes of meeting held on 27<sup>th</sup> Mch. were read & adopted.

Letter from Dr. Clark The Secretary read letter from Dr. A. Campbell Clark  
stating his willingness to become a corresponding member

Proposal for

Corresp. membership. Secretary thereafter proposed & Dr. Napier seconded  
that Dr. A. C. Clark be a corresponding member.

Letter from Mr

Maybridge of Philadelphia Secretary then intimated the receipt of a letter from  
Mr. Maybridge of Philadelphia enclosing prospectus of  
Philadelphia his lectures, but the Society did not deem it necessary  
to take any steps thereon.

Dr. Napier - on

a "Case of ulceration of the Bowel (probably Tubercular) with great enlargement  
of Bowel, with of the Mesenteric glands." H. H. aged 54 years, a  
great enlargement of the Mesenteric glands was admitted into the Victoria Infirmary on  
the 8<sup>th</sup> of March '90 and died suddenly on the 12<sup>th</sup> of the  
same month, being only four days in. His chief  
complaint was of emaciation, debility, flatulence  
and very acute pain on taking food and specially  
solid food. He was always healthy until about  
eighteen months before death when he suffered from



the effects of a chill, Family history, purely negative. Present illness began three months before admission, when he suffered from diarrhoea which lasted three weeks, and left him weak and exhausted. The stools were merely loose and contained no blood or tarry looking material at any time. The pain in the stomach began at this time and has continued ever since. At first, it began, half an hour after food; latterly it is practically never absent; but becomes agonising immediately after taking food of any kind, even the blandest & necessitates the free use of opiates. Appetite is gone. Flatulences have all along, been a troublesome symptom. Has had occasional pyrosis, but never actual vomiting. No hæmatemesis. Patient is extremely emaciated. Has no cough or expectoration. Physical examination of the lungs and heart revealed no lesion. On palpating the abdomen, a hard, nodular tumour was easily made out, situated just under the left costal arch, extending toward the middle line, and reaching almost to the Epigastrium. Was distinctly tender to pressure, and had, apparently, deep connections in the abdominal cavity, but moved downwards slightly on inspiration. Hepatic dullness increased, but no nodular mass felt here. While in the Infirmary, the pulse was rapid and compressible. Temperatures were normal in the morning; on one occasion subnormal -  $97^{\circ}$  F. In the evening - varied from  $100^{\circ}$  to  $101^{\circ}$ . The bowels acted once daily.

On March 12<sup>th</sup>, patient, while sitting up in bed, was suddenly seized with most acute abdominal pain and speedily became quite



Dr Napier On Collapsed and died in a few hours. There was no vomiting.  
"A case of Ulceration Urine was non-albuminous. A post mortem examination  
of bowel, probably was made twenty four hours after death, and Dr Napier  
tubercular etc" detailed the results of it; the lesions found in different parts  
of the bowel, with the large mass of swollen mesenteric glands.  
The liver, spleen, pancreas and kidneys were normal.  
Dr Napier, in reviewing this case, had much difficulty in  
arriving confidently at a diagnosis. Clinically, he thought,  
the balance of opinion lay in favour of cancer, - this view being  
based on the age - 54 years; the emaciation, severity of the pain,  
the total absence of history, symptoms or physical signs of  
tubercle elsewhere; the extreme rarity of primary tubercle of  
the bowels, and the presence of an easily recognisable, hard  
tender, nodular tumour in the left hypochondrium. Against this  
diagnosis, there was the absence of vomiting, of loss of blood,  
and the presence of a suggestively tubercular daily fluctuation  
in temperature. Even at the post mortem examination, though  
in appearance and arrangement very like tubercular ulcers,  
they wanted the usual tubercles on the peritoneal surface,  
while the enlargement of the mesenteric glands was such as is  
not commonly seen in that affection.

Dr Coats made microscopic sections of parts of the tumour  
but had been unable to arrive at any definite conclusion  
as to the nature of the case.

Discussion In the discussion which followed, Dr McWilliam, Carr,  
Hamilton, Dewar, Gibson, Dougall and Brown



took part. after which Dr Napier briefly replied.

Dr Gilmore showing Dr Gilmore then read notes of a case in which a  
"Succenturiate Placenta Succenturiate Placenta was also Praevia, and exhibited the  
which was also Specimen, which was one of interest on account of its great rarity  
Praevia." Several members took part in the conversation which  
followed Dr Gilmore's paper and the showing of the specimen.  
Dr Gilmore was thanked for his interesting communication.  
The Society thereafter adjourned.

M<sup>c</sup>William



# Meeting <sup>xiv</sup>

11 Bridge St. Glasgow  
24<sup>th</sup> April 1890

Chairman

Met the Glasgow Southern Medical Society  
The President, in the Chair.

Sederunt

Sederunt:— Dr. Pollok, Hamilton, McMillan, Erskine, J. S. Gairne, John White, Robb, Kennedy, Templeton, McMurtry, Robertson, H. Kelly, D. Tindal, A. S. Tindal, John Brown, J. Walker Downie & Miller  
Members - with Dr. A. B. Kelly visitor. 18 in all.

Adoption of minutes

The minutes of meeting held on the 10<sup>th</sup> inst were read & adopted.

Dr. J. Walker Downie

Dr. J. Walker Downie then made some remarks as to the radical cure of cases of Nasal Polypi which he had adopted and found generally very successful. He also showed several pairs of forceps of various curves, which he was in the habit of using. These were proved on their opposing surfaces. Dr. Downie also showed four specimens of polypi which he had removed.

Discussion

In the discussion which followed Dr. Downie's paper Dr. Erskine, Gairne and Pollok took part.

Dr. Downie was thanked for his interesting communication after which he briefly replied.

Dr. Kelly on

"Notes of a case of Intestinal Obstruction"

Dr. Hugh Kelly then read "Notes of a case of Intestinal obstruction, which, after operation, proved to be Sarcoma", in which he gave, in detail, the history and symptoms and treatment adopted in this case - that of a lad aged 18 years



Discussion

Dr. McMillan, Erskine, Nairne, D. Laidlaw, Brown, Hamilton  
and the President took part in the discussion which followed, each  
considering the case reported, to be, both interesting and unique.  
The President congratulated Dr. Kelly on the trouble and pains  
taken in this case.

Dr. Kelly thereupon briefly replied - after which the Society adjourned.

Robt. P. McColl



Meeting XV

11 Bridge St., Glasgow.  
8th May 1890

Met the Glasgow Southern Medical Society

Chairman

The President in the Chair.

Sederunt

Sederunt:- Dr. Pollok, Erskine, Hamilton, Gibson, Glaister, McMuray, Macpherson, James Dunlop, McMillan, A. S. Lindal, Robt. Ireland Ferguson, John Brown, Dewar, Kennedy, Ch. Stewart & Miller - 17 in all.

Adopting minutes

Minutes of meeting held on the 24th ult., were read & adopted.

Dr Brown's

Question of

Privilege

Before proceeding to the business before the Society, Dr Brown rose to a question of privilege affecting himself, arising out of a letter which had appeared in the Glasgow Medical Journal of this month written by Dr J. S. Nairne complaining of a report of a paper read by him before this Society, and which was reported to and printed in the April number of the same journal. After hearing several speakers, who considered that the remarks were very well reported, and Dr Brown being satisfied, the matter ended.

Appointment of Dr Glaister intimated that, at a meeting held this evening.

Dr Glaister in case he had been appointed as the representative of the Court Medical "Park v. Nairne" to inquire into the case of "Park v. Nairne."

Dr Nairne

The Secretary then read a letter which he had received appointing Dr Dunlop from Dr J. S. Nairne and dated 8th May 1890, intimating to the Society, that he appointed Dr James Dunlop as his representative in the case.



D<sup>r</sup> Fergus on D<sup>r</sup> Freeland Fergus then made some remarks on "Binocular Fixation, and Convergence of the eyes" and exhibited D<sup>r</sup> Doyle's Stereoscope. He began by saying that binocular vision was important to the individual, because it gave the sense of relief. The Convergence required for such fixation was one of the important factors in helping a person to judge of distance - the nearer the object, the greater the Convergence of the visual axes. The other factors concerned in judging of distance were 1<sup>st</sup> the individual and perhaps inherited experience and 2<sup>nd</sup> the amount of Accommodation required for near vision.

He next briefly described the normal or Emmetropic eye and showed that for such an eye in ordinary circumstances the two functions of accommodation and Convergence were Co-related. A somewhat lengthy description was given of the methods of measuring muscular strength by prisms, the perimeter the Stereoscope and Landolt's special instruments. D<sup>r</sup> Fergus pointed out that the important point was, not to determine the absolute value of any particular muscle, but the Convergence power of the system of each eye working in harmony. The best way of expressing the convergence power was in metric angles. In many cases the great difficulty was to establish the proper relationship between the function of convergence and that of accommodation. It was to overcome this difficulty that Doyle had invented his Stereoscope.

During the last four months, D<sup>r</sup> Fergus had had four



Dr. Fergus. Cont. patients under treatment with it. With one it had been successful in "Binocular fixation" with another it had not, and tenotomy had been performed. "Convergence." The third was still under treatment.

Discussion. An interesting discussion followed in which Dr. Erskine Deane, Stewart, Gilmore, McMillan, Miller & the President took part. Dr. Gilmore laid special stress on the inherited experience in judging of distance.

The President thought that we should accord a hearty vote of thanks for his interesting communication to the Society which was cordially given.

Dr. Fergus thereafter briefly replied.

Picnic Committee. The following members were appointed a committee to consider the arrangements for the Annual Picnic of the Society viz. Dr. Gilmore, Stewart, Hamilton & the Secretary with power to add to their number.

The Society thereafter adjourned

Robt. Bell



Meeting XVI.

11 Bridge St. Glasgow  
29<sup>th</sup> May 1890

Met the Glasgow Southern Medical Society.

The President in the Chair.

Chairman

Sederunt.

Sederunt; - D<sup>r</sup> Pollock, Hamilton, Maigilroy, M<sup>r</sup> Murray,  
McVail, C.D. Robertson, Macpherson, Robb, Erskine, Kennedy,  
J.S. Rankin, Gilmour, Dalziel, John Brown, Jas. W. Wallace,  
Malcolm Black, C.G. King, H. Nairne, Blackwood, D. Tindal,  
Glaister & Miller - Members, & D. Y. Macleod, Jas. Aitken Visiting  
24. in all.

Adoption of Minutes. Minutes of meeting held on 8<sup>th</sup> May were read & adopted.

Letter from

D<sup>r</sup> A. C. Clark. The Secretary read letter from D<sup>r</sup> A. Campbell Clark acknowledging receipt of letter informing him of his election as corresponding Member & thanking the Society for this honour.

D<sup>r</sup> Dalziel shows  
tibia.

D<sup>r</sup> T. K. Dalziel then showed a tibia from a woman aged 70 years at the time of her death and who had suffered from disease due to double Epiphyseitis for nearly 60 years. He thereafter made a few remarks upon the case.

Discussion.

D<sup>r</sup> Gilmour and the President offered a few remarks upon this interesting and uncommon case - and thanked D<sup>r</sup> Dalziel for his interesting specimen shown to the Society after which D<sup>r</sup> Dalziel replied as he had to leave the meeting.

Read letter from  
D<sup>r</sup> Milroy.

Secretary then read letter from D<sup>r</sup> Milroy, declining regretting his inability to be present at the meeting of the Society, but he had forwarded to the Secretary his notes of the specimens which were



Dr Milroy's  
Specimens

exhibited and shown to the Society under the Micro-  
scopes. and which were also read by the Secretary,  
viz. a. A specimen of the Arbor Vitae of the Cervix Uteri  
b. " " " Channelled Uterine Polypus.  
c. " " " Adenoid Sarcoma of the Mamma.

These specimens were much admired by all the  
members present, and after one or two members had  
President moved, spoken. the President moved that we accord a  
vote of thanks. hearty vote of thanks to Dr. Milroy for his interesting  
specimens shown to the Society. and the Secretary  
was instructed to notify Dr. Milroy accordingly.  
This was carried unanimously.

Dr Hamilton

Dr Hamilton then read his paper, introducing  
on Dr Russell's a discussion on Dr Russell's recent report to the  
recent report to Town Council on "Errors in Diagnosis of Infectious  
Town Council Diseases". Dr Hamilton intimated that he had  
on "Errors in Communicated with Dr Russell, inviting him to be  
Diagnosis of Infectious present but he had replied, stating his regret at his  
Diseases. inability to be present on account of a previous en-  
Reported in gagement. He then goes on to narrate an account  
Glasgow Medical of two recent epidemics of typhus, quoting the  
Journal, for exact words of Dr Russell's report. "These two  
Aug. 1890 narratives, then" Dr Russell goes on to say "are only  
Vol 34. No 2. striking examples of what may, without exagger-  
ation, be called the routine experiences of the  
department," and he consequently thought that



Continuation of  
Dr Hamilton's  
paper

it might be "specially useful at this time" to make a careful examination of the registers of patients admitted to Belvidere during the last seven months of the past year, "in order to give some idea of the aggregate of error in the diagnosis of infectious diseases at present." The general result of this examination, Dr Hamilton went on to say, was, that of 1499 consecutive cases sent in to the Hospital, 114, or 7.6 per cent were wrongly diagnosed, and of that 114, 85 or 5.7 per cent of the total cases had no infectious disease at all, and, in the opinion of the Medical Officer, ought not therefore to have been removed. After criticising the report further, Dr Hamilton went on to analyze the figures, as given by Dr Russell in his report - and which Dr Hamilton exhibited to the Society by means of a large table, under ten divisions. First, Scarlet Fever, then Measles, Hooping Cough, Typhoid, Typhus, Diphtheria, Erysipelas, Puerperal Fever, German Measles, and lastly a number of cases sent in under the "cautious diagnosis of fever": and, lastly, 3 cases were marked in the report as variously certified, but none of them suitable for Belvidere.

Dr Hamilton then proceeded to examine in detail the cases under each separate head, and concluded by saying - which I give in his own words - that, "I do not wish it to be understood, in the defence I have attempted to make, that I am anxious to



Continuation of Shield either carelessness or ignorance. A report like Dr Hamilton's the one we have been considering ought certainly to rouse us to greater carefulness; and, as has already been said, would have been kindly welcomed had it come to us through a different source, and been clothed in a different garb. Still, in our efforts to do what we consider best, both in the interest of our patient and the public, we will not be deterred by any thought of "inconvenience, risk or expense" caused to the authorities. If there is any risk of "eventual infection" other than the patient is suffering from, or if a mistake in diagnosis necessitates the patient to be shifted, as is said, from one department to another, we cannot be held responsible. The responsibility of all this rests with the authorities, who ought to make adequate provision for the reception of doubtful cases - a category in which perhaps all our certificates may be placed until the case arrive at the Hospital."

Discussion

Dr. D. C. McVail declined to discuss the paper read by Dr Hamilton, thinking it unfair to Dr. Russell because of his absence - and moved "that the discussion be adjourned until Dr. Russell has had the opportunity of reading Dr. Hamilton's paper, and arranging with the President for a future extraordinary meeting."

Discussion on This was seconded by D Brown and supported by  
D Hamilton's Dr C.E. Robertson.

paper D Hamilton moved the previous question - which  
was seconded by D Blackwood. When - after a  
vote - it was found that D Hamilton's amendment  
was carried by a majority of one - the numbers  
being ten against nine.

The discussion was then continued and taken  
part in by D Blackwood, Glaister, Erskine  
Gilmour, D. Laidal, John Brown and the  
President. after which D Hamilton replied.

The Society thereafter adjourned.

Robt Packer



Meeting ~~XVII~~ <sup>XXII</sup>

Aydesdale Hotel  
Lanark.

19<sup>th</sup> June 1890

Met the Glasgow Southern Medical Society at their  
Annual Picnic - \*

Chairman The President occupied the Chair.

Sederunt - Sederunt - Dr Pollok, Dougall, Hamilton, Miller,  
Gilmour, Walls White, John White, McDonald,  
Gordon, Macgillivray, Provan, Wright, Andrew Wilson,  
C.W. Stewart, Hodge, Fullerton, Cluckie, Greenock,  
Halket, and Watson Lanark - as members, with  
Dr Miller, Newmans as guest. 20 in all.

Cronprie Dr Hamilton, Treasurer, acted as cronprie, in  
the unavoidable absence of Dr Erskine, vice -  
President.

Apologies for Absence Secretary read letters of apology for absence  
from, among others, Professors Fairbairn, Sir  
George Macleod, McCull Anderson & Buchanan,  
Dr Finlayson, Wood Smith, Fleming, Glaister,  
Erskine and Carr of Glasgow - and Dr Cowie  
and Maxwell Adams of Lanark.

Picnic \* Leaving the Central Station by the 11.10 am train  
the party, to the number of eighteen, took train to  
Tillietudlem where they arrived at 12.20 pm.  
After spending a short time in visiting the old  
ruins of Craignethan Castle, the party walked



## Picnic

down the ravine and reached Crossford where brakes awaited their arrival. From thence the party drove to Larnark, - visiting on the way the Falls of Clyde, including Stonebyres, Cora Linn and Bonnington Linn - where dinner was provided in the Clydesdale Hotel.\*

## Toast List

After dinner, which was served in the very best style by Mr Grichton - the President gave the usual loyal and patriotic toasts, "The Queen and Royal Family" which were heartily responded to. The "Southern Medical Society" was then given by the President and in the course of a few brief but suitable remarks he took occasion to refer to the want, which he & others had felt and expressed, of suitable accommodation for the Society. He thought that the time had now come when the Society should possess rooms of its own wherein to hold its meetings. He, at the same time expressed his willingness, and desire to furnish such rooms, should the Society deem it expedient to accept of his offer and to maintain them.

Dr. Dougall, in a few sentences, expressed his own and also that of those present, indebtedness to Dr. Pollack for the very handsome offer which he had made and moved that a committee consisting of Dr. Gilmore, John White, Hamilton & the Secretary, be appointed to consider this offer.



Picnic  
Cont<sup>d</sup>  
Toast List

and how it can best be given effect to; and that  
meanwhile we record a very hearty vote of thanks  
to our President for his generous offer. This was  
seconded by Dr Hamilton and unanimously agreed to.

The next toast, that of "Our Guests" was duly  
proposed by the Chairman and responded to by Dr  
Miles, Newmann. Lastly that of "The President"  
was given by Dr Cluckie - responded to by Dr Pollock.

After dinner, the party proceeded to the Schoolroom  
to inspect the library of the Dr Smellie.

Leaving Lanark by train at seven p.m.  
the party reached Glasgow about half past eight,  
having spent a most enjoyable day, being  
favoured at the same time with the finest of weather

Arrival  
in Glasgow

Rosa Peacock



Meeting I

# Session 1890-91.

11 Bridge St. Glasgow

9<sup>th</sup> October 1890

Met the Glasgow Southern Medical Society.

Chairman

Dr Erskine, Vice-President in the Chair.

Sederunt.

Present:- Dr Erskine, McMillan, Hamilton; John White, H. St. Clair Gray; Carr; Duncan; Alex Rankin; Marshall; Wright; Alex Cameron; Kennedy; Macpherson; Dwyer; Munro; Glaister; Barras; John Brown; Gilman; Robertson; Alex Mc Donald; Robb; Macgilveray; Couper; Barry; Buchan & Miller - 27-

Minutes adopted.

The minutes of meeting held on 29<sup>th</sup> May & 19<sup>th</sup> June were read and adopted - Dr Glaister suggesting that a vote of thanks, should be conveyed through the Secretary to those gentlemen who were good enough to give permission to the Society when on its picnic, to visit the Falls of Clyde through Forehouse Estate, and also to visit the library of the late Dr Sonellie, Lanark. which was unanimously adopted.

Apology from

President

The Secretary then read a telegram which he had received that afternoon from the President from London regretting his absence and apologising

Report of Committee

in re

"Park v. Nairne":

The Secretary then read the Report of the Committee in re, "Park versus Nairne" - which is as follows

See over



Report of  
Committee  
"Dr Park & Nairne"

Carlton Place.

Glasgow

7<sup>th</sup> July 1890.

Report of Committee in re  
Dr Park ~~versus~~ Mr Stuart Nairne  
Members.

Dr Barnas representing	Dr Park.
Prof. Donlop	Mr Nairne
Dr Glister	Court Medical.

Your Committee, after careful examination and consideration of the documents submitted to it (at its request) by Dr Park and Nairne and the Secretary of the Society, and from a careful examination of the official minute books and other documents of the Glasgow Samaritan Hospital, in the hands of the Official Secretary of that Institution, at his office, begs to report that it

I find unanimously that no constitution existed at the commencement of the Samaritan Hospital; but that a constitution was submitted to, and approved by, a meeting of Directors on the 27<sup>th</sup> January 1887, while the resolution determining to found the Hospital bears date the 17<sup>th</sup> November 1885.

It therefore declares that the statement made by Dr Park that "I am now able to produce absolute proof that the statement made by Mr Nairne



Report - Cont.

"that the Hospital at its commencement had no constitution  
"was false and designedly so," is unjustified by the facts,  
"and unwarrantable."

Your Committee also begs to state, that it has been  
shown absolute proof, from official documents, that  
the expenses of management and maintenance of the  
indoor department of the Hospital were solely borne  
by Mr Nairne with the concurrence of the other mem-  
bers of the Medical Staff of the Hospital, and that the  
expenses of the upkeep of the outdoor department were  
shared by him with his confrères.

Your Committee further states that the Bye-  
Laws referred to in the following statement of Dr Park  
were passed at a meeting of the Directors held after  
the Constitution aforesaid had been adopted, as  
proved by an official minute shown to the Committee,  
and your Committee is clearly convinced that Mr  
Nairne was recognised as the official head of the  
Hospital at, and after, the period of its inception,  
as proved by letters of resignation of other members  
of the Staff, having been addressed to him, and by  
the evidence adduced of his having financially  
managed the Institution or Hospital up till, and  
including, the year 1886.

Dr Park's statement "Also that neither  
"the Constitution nor Rules provided for Nairne



Report of  
Committee  
"Park v. Nairne"  
Cont<sup>d</sup>

"being either Manager or Superintendent. As I stated, this office, by virtue of a By-Law which hung in the Ward, was vested in the Medical Staff, but was usurped by Nairne."

On this point, your Committee is also unanimously of opinion, from evidence shown them, that Mr Nairne was virtually and actually Manager or Superintendent of the Hospital during the period in question, and that in him was vested solely the Management of the indoor department of the Hospital; while he shared with his Colleagues the expenses and responsibilities of the Outdoor department.

Your Committee, therefore, determines that the statements made by Mr Stuart Nairne are fully borne out by evidence.

(Signed) James Barras for Dr Park.  
James Denloph for Mr Nairne  
John Glaister for Comt Medical  
of the Society. }

Vote of Thanks  
to Committee

Dr Gilman moved a vote of thanks to those gentlemen who had acted upon the Committee, for their valuable report just read; and also, that the report be engrossed in the minutes, and a copy sent to each of the parties interested therein - which was unanimously agreed to.



Treasurer's  
Statement

The Treasurer, Dr Hamilton, then submitted his Annual Statement which showed a balance in Bank and Treasurer's Hand, of Seventeen Pounds, One Shilling and Eleven pence. He also drew attention to the fact that there were arrears of contributions amounting to Twenty six pounds, ten Shillings owing by Twenty six members. He had not, as formerly, used the services of a Collector during the past session, but had written to several of those who were owing the larger sums.

Adoption of  
Accounts.  
Election of  
Office-  
Bearers.

It was thought that it might be better, in future, still to employ some one to collect the outstanding arrears, by several members who spoke on the subject. Thereafter Dr Glaister moved the adoption of the Treasurer's Statement which was seconded by Dr McMillan.

The Society then proceeded to the Election of Office Bearers, when the following were duly elected,:-

President	-	James Erskine, M.D. M.B.
Vice-President	-	David Sindal M.D.
Treasurer	-	James Hamilton M.B.
Secretary	-	Alexander Miles, L.R.C.P.E.
Editorial Secretary	-	John Brown, M.D.
Seal Keeper	-	Robert Macpherson M.B.

Compulsorial:- Dr Pollok (Convener) Robt, Barras,  
Couper and James Dunlop.

Extra Members to form the Council:- Dr John White,  
Dewar and Munro were elected.

In the first voting, it was found that Dr White & Dewar



Election of  
Office Bearers  
Cont?

had eleven votes each; and that Dr Macgilvray, <sup>and Munro.</sup> had nine votes each, while Dr J. H. Kelly had seven. Dr Kelly's name was dropped - he having the fewest number, then the President ruled that Dr White and Dewar were elected, but that another vote would be required as between Dr Macgilvray and Munro.

Dr McMillan Gilmon protested against this ruling, holding that as Dr White and Dewar had not a majority of the votes, it would require to be taken over again de novo. The President ruled otherwise whereupon Dr McMillan & Gilmon wished their protest entered.

At the next vote, it was found that ten had voted for Dr Munro and nine for Dr Macgilvray - when the President held that Dr Munro was elected.

Appointment  
of Dinner  
Committee.

The following were appointed a Committee with powers to make the necessary arrangements for the Annual Dinner viz - Dr Robertson, Couper, White, Hamilton, Erskine and the Secretary.

Proposals for  
Corres. Members.

Secretary then read the following proposals for Corresponding Membership: -

Andrew J. Hall M.D. Rothesay.

Alexander Johnston. M.B. Methven.

Proposed by Dr Hamilton & Miller.

Ordinary  
Membership

and for Ordinary Membership: -



Proposals for  
Ordinary  
Membership

Peter Ferguson M.B., C.M. 14 St. Andrews Drive P. Shillib  
John Dobbin M.B., C.M. 3 Copeland R. Foran.  
Leuntin Chalmer. M.D. 1 Derby Ter. Sandyford W.  
David Moffat. M.B., C.M. 80 Main St. Anderson  
George S. Middlekin M.A., M.D. 19 Sandyford Place W.  
Proposed by Dr. Gilmore and White.

This being all the business, the Society adjourned.  
James Eskeni



## Meeting II

North British Station Hotel

Glasgow. 23<sup>rd</sup> October 1890

Chairman.

Met the Glasgow Southern Medical Society at their Annual Dinner.

Cronpiet.

Dr. Erskine - President - occupied the Chair - and - in the absence of Dr. D. Lindal, Vice President - Dr. James Hamilton acted as Cronpiet.

Order of the

The following is a list of members and guests present.

Dr. Erskine, Hamilton, McCall Anderson, Barras, John Brown, George Buchanan, Carr, Wm Chalmers (George St), Cooper Dewar, Duncan, W. Fleming, Gillespie, Glaister, Heath Henderson, Arch Johnston, Lapraik, Alex McDonald, McMuray Munro, Miller, Nairne, Napier, Robertson, J. F. Shaw, Jas. Wallace, John White, J. Wall White, W. Millar, McKnight Wilson, and Macgilroy - Members - with Dr. and J. D. Smith guests - in all 33.

Apologies for

Absence.

Secretary intimated apologies for absence from,

amongst others, Sir Geo Mackay, Prof Lindsay, Dr. Finlayson, Patterson, Wood Smith, H. C. Clark, Dullo, McIntyre, Gilmore and Campbell Black of Glasgow and Dr. Douglas Reid, Helenburgh & Clackie, Greenock.

Dinner

After a most enjoyable dinner which was served in best style by Mr. Ruppert.

Toast List

The Chairman gave the usual loyal and patriotic toasts which were enthusiastically responded to.

The Toast of "Our Society" was then given by the President in a very lovely and interesting speech which



Toast List.

was well received. That of "Kindred Societies" was given by The Croquetier, and replied to by Dr. McCall Anderson and J.S. Nairne.

Dr. Barras then proposed "The University and Medical Schools" to which Dr. George Buchanan, Duncan & Glaister replied. "The Youngest Member" was given by Dr. McMillan and responded to by Dr. Paterson Gillespie. Lastly the toast of "The Ladies" given by Dr. Cooper was replied to by Dr. John Brown.

Altogether a very pleasant evening was spent, several members contributing to its success by their gifts of song.

Proposals for  
Ordinary  
Membership

The following gentlemen were thereafter proposed for Ordinary Membership - viz:-

(1) John Adam M.B., Ch.M., 8, Elmhurst St. W.

Prop. by Dr. Macpherson & the President

(2) Joseph Newbigin Glaister M.B., Ch.M., 4 Grafton Place

Prop. by Dr. John Glaister & the President.

The Society there after adjourned.

James Arkine



# Meeting III

11 Bridge St. Glasgow  
6 Nov. 1890.

Met the Glasgow Southern Medical Society.

Chairman

The President in the Chair.

Secretary

Present. Dr. Erskine, Finlayson, John Brown, J. F. Shaw, Robertson, M. S. Tindal, E. M. Millan, Macintosh, J. H. Kelly, Macpherson, Barras, R. D. Taylor, M. Murray, Gilmore, J. S. Nairne, Hamilton, Menzies, Robb, Pollok, Dewar, J. W. Cameron, Miller, members with Dr. Cardew & Roxburgh Visitors - 24 in all.

Adoption of Minutes

The minutes of meetings held on 9<sup>th</sup> & 23<sup>rd</sup> Oct. were read and <sup>adopted</sup>.

Resignation of

Dr. Tindal as V.P. The Secretary read letter from Dr. David Tindal intimating his inability, for private reasons, to accept the office of Vice-President of the Society to which he had been elected.

Resignation

accepted. Dr. Barras moved and Dr. Pollok seconded that we accept the resignation of Dr. Tindal with regret.

Motion for new

election of a V.P. Dr. Brown then moved that we proceed to the election of a Vice-President at our next meeting which was seconded by the Secretary.

Note of thanks

The Secretary mentioned that, as instructed, he had written to Hugh Davidson Esq. Braedale, Lanark, and to Dr. Adams, Lanark, thanking them, in the name of the Society for their kindness - Also that he had

Report sent to

Dr. Nairne & Park. I had sent each of them a copy of the Report submitted to the Society by the Committee.



Letter from Secretary to Victoria Infirmary wishing to be informed of the name and address of the gentlemen to be appointed as our Representatives on the Infirmary governing body of that Infirmary; and concluded by moving that we proceed to elect one of our number at next meeting

Apology from Prof. Gairdner Secretary also read letter of apology for absence from Professor Gairdner.

Dr. Finlayson's paper on "Unusual Complications in Enteric Fever," narrating a number of cases which he had seen, partly in private practice, but mostly among patients in the Western Infirmary - where an outbreak took place in August 1884, and which affected some nurses, servants and patients - He stated in the First place that:-

"Abortive attacks occurring in Fever epidemics are not necessarily free from danger, and narrated a case to prove this."

Secondly, he related a case where there was an "Obscure illness with little or no pyrexia obviously from Enteric Fever poison with a complication of carbuncle, followed by Blood poisoning and Death."

Thirdly - he told of the case of a nurse with "Convulsions, presumably Uraemic, about the seventeenth day" followed by death.

Fourthly he detailed a case where there were "Small black spots of gangrene on the sole of the foot, apart from pressure, and where there were Rigors before Death."



Continuation of  
Dr. Finlayson's  
paper.

The Fifth case narrated showed "Harming nervous disturbance developed with the subsidence of the Pyrexia." Sixthly, he detailed a case which, on the twenty-first day of the illness, developed "Double Peritonitis ending in Necrosis".

The Seventh case recorded was one where "Gangrene of the Lung" supervened and where death took place.

The Eighth case was one of "Paralysis and Anaesthesia of the limbs after recovery from Enteric Fever".

The Ninth Case was one wherein there was "Concurrent development of Enteric Fever and Tubercular Meningitis with Pyelitis" which ended fatally.

Discussion.

Dr. Barras asked Dr. Finlayson if there had been any difficulty in passing the Catheter in the last case spoken of, & was told that there was none; and then went on to remark that the cases just narrated by Dr. Finlayson were quite unusual and not altogether typical of cases usually seen by medical men in practice. He then related a case which he had seen complicated with Pneumonia, which was removed to Hospital where the patient died, and where death was certified as from Gangrene of the Lung. He also mentioned another case complicated with Phlegmasia Dolens.

Dr. Simons suggested that, as the hour was getting late, the discussion should be adjourned to another night, as the subject was very important, and that the cases



Discussion brought before the Society so unusual, that many of the Members Continued. would like to have something to say about them. After several members had spoken, some in favour of going on with the discussion, others for adjournment, it was ultimately agreed to postpone the discussion till a future meeting of the Society.

The secretary intimated that

Proposal for A. Brown Kelly, M.B., B.Sc., 16 Carlton Place.  
Memberships. was duly proposed as an ordinary member of this Society by D.<sup>r</sup> Robertson and Erskine.

This being all the business, the Society adjourned.

James A. K. P. M.



Meeting IV.

11 Bridge St. Glasgow  
20 November 1890

Met the Glasgow Southern Medical Society

Chairman

The President in the Chair

Sederunt

Sederunt:- Dr. Erskine, John Brown, Maynard, Barras, A.S. Tindal, McMillan, Fenwick, J.S. Rankin, J.W. Glaister, Macintosh, J.W. Cameron, Robertson, Alex. MacDonald, Elwan, Macpherson, Couper, John White, Dobbin, Ferguson, H. Main, M. Murray, Gilmore, Gordon, Hamilton & Miller 25 in all.

Adoption of Minutes

Minutes of meeting held on 6<sup>th</sup> inst, were read and adopted.

Letter from

Dr Hall

Rothsary.

Secretary read letter from Dr Hall, Rothsary, thanking the Society for the honour done him in electing him a corresponding member.

Ballot for

Ord. member.

Election of

Vice-Pres

Dr A.B. Kelly, 16 Carlton Place was thereafter unanimously elected an ordinary member.

Dr Barras then proposed that Dr Jas. Hamilton be elected Vice-President of the Society in room of Dr D. Tindal - This was seconded by Dr A.S. Tindal and agreed to nem, con.

Notice of motion

The Secretary then gave notice that we proceed to elect one to fill the vacant office of Treasurer at our next meeting.

Representative

Governor at

Victoria

Infirmary

Dr Gilmore proposed and Dr Brown seconded the reelection of Dr McMillan as our Representative on the Governing Board of the Victoria Infirmary



Vote of Thanks to  
D. M. Millan.

Dr. Erskine proposed that a hearty vote of thanks should be accorded to D. M. Millan for his past services in this respect & for the way in which he has represented us, for which D. M. Millan returned thanks, and made a few observations regarding the work of the Infirmary and its condition financially and otherwise.

Pathological  
Specimen

In the absence of Dr. Hamilton, Dr. Brown showed a Uterus removed p. m. which was the seat of rupture and had also attached to it, a fibroid tumour, and made a few remarks concerning the case. Specimens were also shewn under the microscope.

Paper by  
W. Maynard  
giving Resume  
of some work  
done in the new  
Victoria Infirmary  
in its first nine  
months.

Mr. A. Ernest Maynard then gave "A short resume of some of the work accomplished in the Male Surgical Ward of the new Victoria Infirmary since its opening nine months ago." In doing so he thought it would be more interesting and profitable to present what he had to say in the form of a series of Cases - Thus:-

Reprinted fully  
in Glasgow  
Med. Journal  
for Dec '90

First Series consisted of three cases, of unfrequently met with dislocations viz. Comp. disloc. of foot backwards - Comp. Sub-astragaloid disloc. of foot & Lateral disloc. of knee - All did well.

Second Series consisted of 6 Cases of Haemorrhoids, in four of which he used the Clamp and Panty for internal piles; and in two - which were external - he operated by transfixing them with needle threaded with green gut, through the base of each pile, and then



Continuation of Snipping it off with Scissors, & the cut edge brought  
Mr. Mayland's together with Sutures.  
paper.

Third Series consisted of two cases of Caries of  
the Skull, both of which, after operation, did well.

Fourth Series was one consisting of Eleven cases  
with Ulcers on the legs. In the treatment formulated  
two principles which Mr. Mayland thought  
ought to be observed by Surgeons in the treatment of  
these troublesome cases. The first being this - viz  
"Treat the Ulcer as a Septic Wound and try to ren-  
der it Aseptic". And the second this: "Relieve  
the frequently congested area of the Ulcer and  
induce healthy active circulation in the part".  
Mr. Mayland always advises washing the Ulcer or  
immersing the leg in a solution of Bichloride of  
Mercury 1 in 2000 warm for some hours  
in carrying out his first principle - And for  
the second he has found great benefit to follow  
thence of Massage to the leg in the neighbourhood  
of the Ulcer. He condemned all Ointments and  
Salves, Lotions &c.

Fifth Series consisted of three cases of Tubercular  
Diseases of Joints - which were all serious, and  
when it was feared that Amputation would be  
required in all - but all did well without  
Sixth Series consisted of 16 cases of Fractures <sup>that.</sup>



Mr. Mayland's of Various Bones made up of - 100 of Base of Skull  
Paper. 1 Compd. of forearm, 1 Compd. Comminuted of Jaw, 2 of  
Thigh, 1 of Patella, 8 of bones of the leg, & 1 of the Ribs.  
This series does not include minor fractures of hands & feet.

Seventh Series consisted of Three Cases of Burns, treated  
antiseptically by being encaased in strips of Boracic lint  
being out of a warm solution of Bicloride 1 in 2000  
over which is placed S.P. tissue then Cotton Wool and a  
bandage.

Eighth Series consisted of Injuries to feet and hands,

Ninth Series consisted of Four cases of Tumours  
One, a large mass of tuberculous glands removed from  
the Throat - One a Lipoma. The remaining two  
Cancers. One of the latter - an Epithelioma - was  
located in the skin midway between the hip and chin;  
the other, a carcinoma of the Umbilicus which was proved  
to be of the cylinder celled variety.

Mr. Mayland then narrated a case of Acute Traumatic  
Tetanus in a boy aged 14 years who ultimately recovered  
under very large doses of Chloral 30 grs. ev 2 hours.  
The spasms were so severe and frequent that within  
the first three days of his residence in the Infirmary  
he had no fewer than 215 Spasms.

Mr. Mayland then described a case of Weakness  
in the Right Inguinal Region which was cured by  
operation - There was no hernia in this case.



Continuation of Mr Mayland's Paper. The next case was one of moderately bad Mithral Stricture which was cured by an external Urethrotomy after Whitehead's Method.

Mr Mayland then mentioned two cases wherein he had failed by operation to effect any ultimate good. and concluded by acknowledging the able assistance he had received in the treatment of these and other cases, from his colleagues and the resident assistants and others connected with the Infirmary.

Discussion

In the discussion which followed Dr Erskine, Gilman, Robertson, Macintosh, Mr Millan, Barra, and Miller took part each congratulating Mr Mayland on the excellence of his paper and on the good success of his work at the Victoria Infirmary.

The President took occasion to thank Mr Mayland for his interesting & instructive communication - after which Mr Mayland replied.

The Secretary intimated that the following gentlemen were duly proposed for the ordinary membership of the Society viz -

Thomas Richmond, M.D. C.P.S. 26 Barnbank Ter.

Prop'd by Dr Miller & Erskine.

Thomas Russell, L.F.P.S. 18 Handel Row

Prop'd by Dr Erskine & Brown -

James Erskine



Meeting V.

11 Bridge St. Glasgow.

4 December 1890

Met the Glasgow Southern Medical Society

Chairman.

Dr Barras, in the Chair

Sederunt

Sederunt:- Drs Barras, Couper, Gordon, Dr Millan Macpherson, McMuray, J. M. Cameron, Middleton, Macintosh, Dr Wallace, Finlayson, R. Macdonald, Kennedy, Service, Munro, Robertson, Gilmore, Robb and Miller, 19 in all.

Adoption of  
Minutes

The ~~minutes~~ minutes of meeting held on 20<sup>th</sup> Nov. last were read - after which Dr M. Millan rose to ask the Chairman a question regarding the appearance in the Glasgow Herald of 2<sup>nd</sup> December last, of a statement to the effect that Drs Erskine & Hamilton had been sent as a deputation to London from this Society - One or two other members having spoken to the same question - the Secretary suggested that, as the matter raised by Dr M. Millan had no reference to anything which passed at last meeting of the Society the minutes should be passed and adopted which was agreed to

Dr M. Millan then asked the Chairman if he could give any information regarding the paragraph which appeared in the paper as above indicated as he was not aware that the parties named had been sent by this Society as a deputation to London. Dr Barras called upon Dr Macpherson if he



Could give any information upon the subject - when the Secretary at this point asked to be allowed to say a few words before Dr Macpherson by way of explanation. He then stated that he had been waited upon by the President, Vice-President or Editorial Secretary on November 25<sup>th</sup> when after conversation, he was asked to convene a meeting of Council for Thursday 27<sup>th</sup> November to consider the advisability of sending a deputation to London to witness the demonstration of Dr Koch's Treatment by Dr Heron and Watson Cheyne.

The Secretary also stated that he had been unfortunately and unavoidably absent from that meeting and had no official knowledge of what took place.

Dr Macpherson then stated that he was present at that meeting of Council and had protested against the deputation being sent - but he thought it would be unwise to discuss this matter in the absence of both the President & Vice President.

The Secretary then read a telegram that same afternoon from London to this effect: -

"Sorry cannot return till Saturday, extremely interested in new treatment. Erskine Hamilton."

Dr Filmore asked if the question of Dr McMillan of Dr McMillan would be brought up at



next meeting, and was informed by the Secretary that it would not unless some one made a motion to that effect. As it was evidently the wish of the meeting that this matter should be postponed, the following notice was handed to the Secretary:—

Dr M. William will request, at the next meeting, an explanation of the following paragraph:—

\*Glasgow Herald. 2<sup>nd</sup> Dec. 1890

Dr James Erskine of the Ear and Throat Institution, along with Dr Hamilton, have been sent as a deputation to London by the Southern Medical Society to see the application of Dr Koch's treatment in tubercular disease. Dr Erskine, who has studied long in Berlin, will submit his views on his return."

Election of  
Dr Robb as  
Treasurer.

Dr Macpherson moved and Dr Munro seconded, that Dr R. A. Dr Robb be elected Treasurer of the Society in room of Dr James Hamilton made V.P. which was unanimously agreed to.

The Secretary then moved that we proceed at our next meeting to elect one to fill the vacancy in the Court Medical

Owing to the absence of Dr Hamilton - his paper in his name on the billet was departed from.



Discussion on  
Dr. Finlayson's  
paper on  
"Enteric Fever"

Hereafter Dr. Filmon resumed the Discussion  
on the paper read by Dr. Finlayson at a previous  
meeting of the Society entitled - "Unusual Com-  
plications in Enteric Fever" - which was taken  
part in by Dr. Miller, Middleton, Macintosh  
Macintosh and Barras - after which  
Dr. Finlayson replied -

The Society thereafter adjourned.

Barras



Meeting VI

11 Bridge St. Glasgow  
18th December 1890.

Chairman

Met the Glasgow Southern Medical Society  
The President in the Chair

Sederant

Sederant:- Dr. Erskine, John Brown, A. Tindal, Barras  
McMillan, R.D. Taylor, J.M. Wallace, Alex. Rankin, Dewar, J.K. Kelly,  
Gilmoir, McMurray, Hamilton, Nigel Stark, Pollock, Hugh Kelly,  
A.M. Murdoch, Robb, Thos. Russell, Couper, Robertson, Service,  
McCameron, Alex. Macdonald, D. Tindal, Macpherson, A.B. Kelly, and  
Miller 28 in all.

Adoption of Minutes.

Minutes of last meeting were read and adopted.

Election of Dr. Kelly

to Vacancy in

Court Medical.

Dr. Couper proposed that Dr. Finlayson be elected to  
fill the vacancy in the Court Medical - which was  
Seconded by Dr. McMillan -

Dr. Russell proposed that Dr. J.K. Kelly be elected  
This was seconded by Dr. Hamilton and agreed to -  
Dr. Couper withdrawing the name of Dr. Finlayson  
with Consent of his Seconders.

Dr. McMillan's

"Notice of Motion"

Dr. McMillan then rose to ask for information regarding  
the paragraph which appears in the previous minute - of  
which question he had given notice - and called in  
question the action of the Council in deciding as  
they did that his "notice of motion" should not  
appear on the Gilet - for this meeting.  
After several members had spoken to this problem



Discussion on binary objection taken by D. M. Millan -  
on D. M. Millan's The Secretary related how that had happened  
Notice of motion stated that the Council had met and considered,  
among other things, D. M. Millan's notice, and  
had come to the conclusion unanimously that as  
it was only a "notice to ask a question" and  
not a "notice of motion" - as there was nothing  
to be moved - that it need not appear on the  
bulletin - and read the following note which he had  
received from D. M. Millan since last meeting of  
the Society; -

Rannochlea

1 St. Andrews Drive

Palloshieldy

10<sup>th</sup> Decr. 1890

Dear D. Miller.

Kindly correct my notice of motion  
for next meeting by substituting what I have written  
on the other side. Preserve the newspaper cutting  
and oblige.

Yours sincerely

Edw. M. Millan.

Here follows what was written on the other side  
as above referred to

"Shall ask explanation regarding paragraph  
in Glasgow Herald of Decr 2<sup>nd</sup> referring to  
deputation sent to London &c. E. M. M.



Continued  
Discussion

The Secretary further stated that, as instructed by the Council, he had sent the following note to Dr. McMillan:-

Dear Dr. McMillan

I hereby acknowledge receipt of your note of 10<sup>th</sup> inst,

The Council met last night to arrange the business for next meeting and for other purposes, and, amongst others, your "notice of motion" was under consideration.

You will perhaps observe from it, that it is not really a notice of motion, as there is nothing to be moved - but it is simply a notice to ask a question.

After considerable discussion, the Council came to the unanimous finding that that being so, it should not appear on the biller. That, however, does not prevent you from repeating the question at next meeting, before the commencement of the business, and after the minutes have been read and adopted.

Your notice was not read to the meeting after being handed in - and then you have seen cause to change somewhat the contents of your notice of question. On these grounds also, the Council thought that it ought not to appear.

However, I trust that you may receive an answer which will be satisfactory to all parties.

I remain Dear Sir  
Yours sincerely  
Thos. Miller  
Secy

Froshull  
12 Dec' 90



Continued  
Discussion

The discussion was continued by Dr Gilmore who concluded by moving that

"The Society disapprove of the action of the Council and declare that it exceeded its powers in appointing two of its members as a deputation of the Society, before the subject had been discussed and ratified at an ordinary or extraordinary meeting called to consider the matter. Further that it minute

its disapproval of the Council omitting from the business on the billet a notice of question asked regarding the said deputation, which had been proposed and seconded at the previous meeting."

This was seconded by Dr C. E. Robertson. Dr John Brown in the course of his remarks spoke in support of what the Council had done - and concluded by moving as an amendment that we approve of the action of the Council in this matter. This was seconded by Dr Hamilton -

Dr J. H. Kelly suggested that Dr Gilmore's motion should be separated - as it was really composed of two different things - and it was then agreed that

Dr David Couper proposed the first part of Dr Gilmore's motion - which was seconded by Dr J. H. Kelly -

Dr Gilmore moved the second part which



Continued  
Discussion

was seconded by Dr. Robertson. and the vote was taken when it was found that 10 Voted Approval - and 12. Voted Disapproval - of the first part of Motion which referred to sending the deputation to London.

Then Dr. Browne's Amendment was put against Dr. Filmon's motion - when it was found that Eleven Voted for each - when the Chairman gave his casting vote in favour of Dr. Browne's amendment - i.e. in support of the action of the Council.

The hour being late the other business on the billet was not proceeded with.

The following gentleman was then proposed for the membership of the Society

James Shaw M.D, 34 Hopetown Place  
prop. by Dr. Service & Hodge.

The Society thereafter adjourned.

James Eckman



Meeting VII

11 Bridge St. Glasgow  
2<sup>nd</sup> January 1891.

Extraordinary  
Meeting  
Chairman  
Sederunt

Met the Glasgow Southern Medical Society  
An Extraordinary meeting of the Society (accord-  
ing to Law & 17) was held here this evening  
The President in the Chair

Sederunt :- Dr. Erskine, Gilmore, Clerk, Fenwick,  
J. Rankin, M. Murray, Ferguson, Dewar, Walker,  
J. Kelly, Thos Russell, Pollok, R. D. Taylor, Hutchison,  
Haddow, Alex. Macdonald, Carr, Downie, John White,  
N. C. McDonald, Robertson, Parry, Munro, Wm. Chalmers,  
Service, St. Clair Gray, Hugh Kelly, Napier, J. Nairne,  
Macintosh, A. L. Tindal, Jas. Dunlop, P. F. Shaw, Hamilton,  
J. V. Wallace, Barras, Duncan & John Brown, J. W. Cameron  
Carpenter and ~~Robert Shaw~~  
In the absence of the Secretary from illness, Dr  
Brown acted as interim Secretary.

Notice of Motion  
of Council

The meeting then proceeded to the business  
on the biller and considered the following motion  
which was duly moved and seconded, and became  
the finding adopted at a meeting of Council held  
on Monday 22<sup>nd</sup> December last viz :-

"That, inasmuch as the action of the Council in  
sending a deputation to London to represent this  
Society at Dr. Cheyne's Demonstration has been  
interfered with and their action disapproved of,  
and such disapproval minuted, the Council

Carpenter  
J. W. Cameron  
Shaw, Robert



resolve unless this disapproval be expunged from the Society's minutes, to resign as a body.

Proposed Second  
of Motion

The above motion was proposed by Dr. Dewar and seconded by Dr. Munro.

This motion was, however, abandoned in favour of one by Dr. John Brown - which was seconded by Dr. James Dunlop - and was to this effect: -

"That the proceedings of the Council in sending a deputation in the name of the Society to London, to see a demonstration of Dr. Koch's treatment, be approved of."

Proposal of  
Amendment.

Dr. Eben. Duncan moved, as an amendment, the previous question - which was seconded by Dr. Gilman.

Dr. H. Kelly proposed to add a rider to Dr. Duncan's motion, but this was not accepted by Dr. Duncan or his seconder.

To these motions there spoke Dr. Hamilton, Pollok, Robertson, Barras, Wallace and Russell after which Dr. Brown replied.

Amendment  
Carried

On a vote being taken, it was found that sixteen voted for the motion and twenty five for the amendment, which was declared carried.

James Erskine



# Meeting VIII

11 Bridge Street, Glasgow.  
8<sup>th</sup> January 1891

Sederant

Met the Glasgow Southern Medical Society  
Sederant:- Dr. Couper, Dr. Murray, J. W. Cameron,  
Downie, Service, Nairne, P. F. Shaw, Duncan, McMillan,  
Hugh Kelly, Stark, Robertson, Gilman & Cullen  
14 in all.

On the motion of Dr. Duncan seconded by Dr  
Gilman

Chairman

Dr. McMillan was appointed Chairman.

Interim

On the motion of Dr. Couper seconded by Dr. Murray

Secretary

Dr. Gilman was appointed Interim Secretary - and

Adoption

of Minutes.

read the minutes of the last two meetings of the Society  
which, after some slight alterations as to members  
present, were approved of -

Election of

Member.

A ballot was taken for Dr. James Shaw, of 34  
Hopetoun Place - who was unanimously elected  
an ordinary member.

Letter from  
President

The Chairman then read the following letters:-  
1<sup>st</sup> Addressed "To the Chairman of the meeting  
of the Glasgow Southern Medical Society held 8<sup>th</sup>  
Jan'y 1891:-

Dear Sir, "Enclosed you will please find  
intimation of resignation of Members of Council  
of the Society. Dr. Robert Macpherson is so very  
seriously ill at present that he is unable formally



to resign his office of Seal-Keeper. He wishes me, however to state that he acquiesces in the decision of the other members of Council who have resigned their Offices."

I am yours faithfully  
(Signed) James Erskine

Resignation of 2<sup>nd</sup> Members of Council  
To the Glasgow Southern Medical Society  
In consequence of the finding of the Society at the ordinary meeting held on the 18<sup>th</sup> ult., and also that of the Extraordinary Meeting held on the 2<sup>nd</sup> inst, we, the undersigned members of Council, beg to resign our respective Offices.

(Signed) James Erskine - President  
James Hamilton Vice-President  
Richard A.D. Robb, Treasurer  
Alexander Miller, Secretary  
John Brown Editorial Secretary  
Alexander Munro  
John White  
D. Mackellar Esq.

Glasgow  
6<sup>th</sup> Jan'y 1891

Acceptance of Resignation

It was resolved to accept these resignations, and the Interim Secretary was instructed to intimate to the different gentlemen the deep regret of the Society at losing the benefit of their services.

Nomination of Office Bearers

Dr Duncan proposed and D Pollok seconded the Nomination of the following list of Office Bearers



Nominations to be elected at next meeting - viz: -

Office	President	John Stuart Nairne	F.F.P.S.G.
Bearers	Vice President	James H. Kelly	M.D.
	Treasurer	David Couper	M.D.
	Secretary	C. E. Robertson	M.D.
	Seal-Keeper	P. F. Shaw	L.R.C.P.
	Editorial Secretary	Hugh Kelly	M.B., C.M.
	Council	Dr. Barras, Stark & Gilmour	
	Auditors	Dr. Duncan & Palloke	

Dr Stark on Dr Stark then read a short paper on Dysmenorrhoea "Dysmenorrhoea" having special reference to Treatment and narrated seven cases. He advocated the old mixture of Spirit of Sassafras with Whisky; hot water injections; and, most useful of all, dilatation of the Cervix with Duke's Dilator.

Discussion Dr. Palloke thought most cases due to obstruction or mechanical displacement. He had found dilatation unsatisfactory, unless followed up by the employment of a stem pessary. The swabbing of the Endometrium with Carbolic Acid was often beneficial. He asked for the writers experience of Electricity.

Dr Nairne thought the whole subject beset with difficulties. Menstruation was unknown after removal of the ovaries and tubes. Often great



Discussion in Pain was present without dysmenorrhoea, and at all continued periods of the Menstrual cycle. He questioned how Stenosis could be benefitted by parallel dilators, unless when due to fibroid degeneration, when, in his opinion, the proper treatment would be removal.

Dr Duncan found that Marriage cured many cases, that many were purely neurotic, the fault being in the Central Nervous System: he thought that only cases which resist treatment required to be examined locally.

Dr Gilman agreed with Dr Stark that alcohol should never be given. He had used various kinds of Hypertonic with benefit, pregnancy following. He considered that galvanic Stems were better than the simple ones; that most cases in the married were due to gonorrhoea directly or indirectly, and that, in the single, a husband was the best treatment.

Dr McMillan reviewed the various points in the discussion and Dr Stark replied.

The meeting then separated.

Edw McMillan.  
Interim Chairman



Meeting IX.

11 Bridge St., Glasgow  
22<sup>nd</sup> January, 1891

Met the Glasgow Southern Medical Society

Sederunt

Sederunt:- Dr. M. Millan, Gilman, Hamilton, Robt. Carr, J. N. Glaister, McKnight Wilson, Alex. Cameron, Alex. McDonald, Erskine, M. Murray, Downie, Marshall, Wright, Dewar, John White, John Brown, Lindsay, Steven, Ferguson, MacGillivray, King, Hutchison, C. W. Stewart, Hugh Kelly, Richmond, P. J. Shaw, St. Clair Gray, W. M. Farlane, A. B. Kelly, J. M. Wallace, Kennedy, Service, Hodge, Macintosh, Robertson, D. Moffat, Montgomery, J. M. Cameron, Clark, Stark, Duncan, Munro, J. Rankin, J. Nairne, J. V. Wallace, A. Miller, Barras, J. H. Kelly, Gordon, J. Glaister, Fullerton, Cooper, Northman & Jas. Shaw. 54.

Chairman.

Dr. Brown proposed that Dr. Glaister be appointed Chairman - this was seconded by Dr. M. Millan & agreed to. On taking the Chair, Dr. Glaister said that his chief fitness lay in his being entirely neutral, and only wishing to conduct the business of the meeting upon business principles.

Adoption of Minutes

The minutes of meeting held on the 8<sup>th</sup> inst. were read by the interim Secretary and, after considerable discussion as to the competency of the action taken at that meeting, were approved of.

Election of

Office-Bearers. The Society then proceeded to the election of Office-Bearers when Dr. Duncan proposed and Dr. M. Millan seconded, the election of Dr. J. Stuart Nairne as



Election of  
Officers & Bearers  
Cont.  
President

President. Dr. Lindsay Stemen proposed and Dr. McDonald seconded, the election of Dr. James Erskine. After balloting it was found that there votes for Dr. Navine 15. Dr. Erskine 36. Dr. Erskine was therefore duly elected as President

Dr. Duncan then proposed and Dr. Nigel Stark seconded, that Dr. J. H. Kelly be elected Vice-President.

Dr. Lindsay Stemen proposed & Dr. Kennedy seconded, Dr. James Hamilton as Vice-President

Vice President 16 votes for Dr. Kelly & 35 for Dr. Hamilton. Dr. Hamilton was therefore elected Vice-President

Dr. Lindsay Stemen then proposed the suspension of the Standing Orders in order to allow of the remaining members of the old Council being re-elected en bloc. This was seconded by Dr. Hutchison, but Dr. Barray interposed.

Dr. Service then moved that Dr. Robb be elected Treasurer which was seconded by Dr. White.

Treasurer Dr. Duncan moved that Dr. Couper be elected - this was seconded by Dr. McMillan - After a ballot it was found that 13 votes for Dr. Couper and 24 for Dr. Robb who was declared duly elected.

Dr. Couper proposed that Dr. Robertson be elected Secretary which was seconded by Dr. Hugh Kelly.

Secretary. Dr. Service proposed that Dr. Alexander Miller be elected which was seconded by Dr. McDonald and agreed to, after Dr. Robertson had withdrawn his name in favour of Dr. Miller.



Continuation of Election of Office Bearers. At this stage Dr Lindsay Steven proposed the suspension of the Standing orders which was seconded by Dr Cooper. Dr Barra making a personal explanation - and agreed to whereupon Dr Steven moved that Dr John Brown be Ed. Secretary, Dr. Editorial Secretary, and Dr. John White, Alexander Munro and Dr. Mackellar Brown be elected Members of Council. This was seconded by Dr. Macdonald and agreed to after Dr. Nigel Stark has made a personal explanation.

Vote of Thanks to Auditors. Dr. Duncan & Pollok were then thanked for their services as Auditors since last meeting.

Notice of Motion by Dr. Gilmour to alter Law 17. Dr. Gilmour then gave notice of motion to alter Law 17 by the addition of the words "and Governor of the Victoria Infirmary" after the words "Compt Medical" on the third line of said Law.

Notice of Motion by Dr. Erskine to alter Laws. Dr. Erskine then gave notice of motion "That at next meeting of the Society a Committee be appointed to alter and amend the Laws of the Society as may seem necessary, and, in particular, to define the duties and powers of the Council of the Society."

Dr. Barra, then proposed a vote of thanks to Dr. Glaister for his conduct in the Chair - This was seconded by Dr. Erskine and enthusiastically carried after which the Society adjourned.

Glaister



Meeting +

11 Bridge St., Glasgow  
5<sup>th</sup> February 1891

Chairman

Met the Glasgow Southern Medical Society.  
The President - Dr Erskine - in the Chair.

Siderunt

Siderunt:- Dr Erskine, John Brown, Barnes, McKelly, Knox, Duncan, McFarlane, John Glaister, Alex Bryce, E. McMillan, Templeton, Walker, J. N. Glaister, Gilmour, Milroy, Service, Robertson, Mc Murray, Hamilton & Miller - 20 in all.

Reading of  
Minutes

The minutes of meeting held on 22<sup>nd</sup> January were read when Dr McKelly rose to ask that a question which he had put at last meeting to the Chairman should be put into the minutes - which was seconded by Dr Duncan, several other members speaking for or against its insertion. When the Secretary moved the suspension of the Standing orders to allow Dr Milroy to show his specimens and read his paper, because he required to leave early - which was agreed to.

Specimens shown  
by Dr Milroy

Dr Milroy, Kilwinning, then showed a specimen of Carcinoma of the Nipple of a man aged 70 years and gave a few notes of the case and with it the family history. He also showed under the microscope a specimen from the tumour. He showed also a microscopic specimen of another tumour - and of a rare stone (Olivine) found in the railway cutting near Kilwinning.

over



Dr Milroy's  
paper

Dr Milroy then read a paper entitled:-  
"Reminiscences of Midwifery Practice in a Country  
Parish". He spoke of Robert Craig, who about 70 years  
ago received the Licence of Faculty of Physicians, Surgeons & Apothecaries  
who practised in Kilwinning for over 60 years. & who when dying  
gave to Dr Milroy, his midwifery forceps - his Mental Key, a  
Cataline; an amputating knife. & Burns' Principles & Practice of  
Midwifery. He was a good type of the Scotch Country Doctor  
of his time. He lived in resurrection time & used to relate  
how bodies were lifted - & told how that when he was drag-  
ging a dammy to the surface, he was shot at by one of the  
watchers - He instantly fled down High St and bolted into  
a pig's sty beside the pig & heard his pursuers pass by him.  
At first when he began in 1823 the cases needing his care  
were mainly Indispositions & cases for bleeding. When called  
to a confinement he always took his gun with him. So that  
between the produce of his gun fiddle making & the practice  
of his profession he managed to make a living and was  
gathered to his fathers in 1883. He told Dr M. that his income  
even in his prime days, never reached £150 a year.  
He brought home some now notable men in his time, one  
of these is the Hon. Jas. Service, who, for several years was  
Premier of Victoria. James' head was a big one or the  
pelvis a small one for he required to be delivered by the  
forceps. The doctor used to think that the grand Victorian  
Railway schemes of the Premiers, must have been brought



Continuation of about by the early and lasting effects of these iron blades on his  
Dillilroy's paper brain cells. Dillilroy succeeded O'raig after his half century,  
work. Dr. M. state that he had difficulty in making out the 'O's'  
when he began work. During the first 15 years of his work  
Dr. M. attended from 150 to 200 cases yearly, in all classes  
of Society - from the inmates of the travelling caravan to that of the  
Castle - and met with nearly all forms of presentation and  
abnormalities. Has had 4 cases of Placenta Praevia during  
the last 20 years - One case of Vesicular Mole Pregnancy, in  
which, after bleeding for a week, labour began and about a  
bushful of what Gooch describes as "White Currants, in red  
Currant juice." Was present at 1 case of Rupture of the Uterus.  
Dr. M. then went on to tell of a "drinking Country doctor  
who is usually considered a clever man. This man was sent  
for to a "case" on a Saturday, remaining all Saturday night, all  
Sunday all Sunday night and all Monday - His wife asked  
Dr. M. to go in search of him & found him, the patient and her  
husband all in a state of intoxication. Dr. M. delivered the  
half-conscious woman with forceps & brought the doctor safely  
home to his wife, who, it was thought, would proceed to give him  
a certain lecture. Has had no deaths from funic presentations  
Has had many cases of ruptured Placenta, some of which were  
stitched & some not. Has had sometimes rupture of a worse  
kind, viz laceration of the cervix which are peculiarly prone  
to after Cancer of the Cervix. Has had several infantile deaths  
from the use of Ergot. Also considers strangulation of the "O" - a cause  
of infantile death. Only two maternal deaths from puerperal  
peritonitis in twenty years. v.c.c.



Discussion on Dr. Milroy's paper. In the conversation which followed, Drs. McMillan, Knox, John Glaister, Duncan, Barras, Miller and the President took part, each remarking on the interesting character of the paper communicated to the Society by Dr. Milroy. Before leaving - on the motion of the President, a hearty vote of thanks was given to Dr. Milroy - who briefly replied.

Dr. Kelly's motion The Society then proceeded to consider the motion of Dr. Kelly regarding the insertion of his question in the minutes - when Dr. John Brown rose and moved as an amendment "That the question be not put" - which was seconded by Dr. Knox - After Dr. Fiksom and Glaister had made explanations regarding what took place at the previous meeting - and after Drs. Hamilton, Barras, and others had spoken - and when the President had replied in a manner which was satisfactory to Dr. Kelly, he rose to withdraw his motion with the consent of Dr. Duncan - which was agreed to - after which the minutes were adopted.

Motion withdrawn  
Adoption of Minutes Dr. Duncan then moved that the Secretary be instructed to write to those gentlemen who had been elected to office at the last meeting, to know from them whether they had accepted office - which was seconded by Dr. McMillan - Dr. John Glaister moved



the previous question which was seconded by Dr Hamilton  
After several members had spoken - the motion was withdrawn.  
There being no other business the Society adjourned.

James Esquire

Meeting 71

11 Bridge St, Glasgow  
19<sup>th</sup> February 1891

Chairman

Met the Glasgow Southern Medical Society

Secretary

Dr Hamilton - Vice-President in the Chair

Present:- Dr Hamilton, John Brown, James Murdoch,  
Robt. Montgomery, Thos Russell, Alex Rankin, Mc Murray  
Fergus, Gibson & Miller - 12 in all

Adoption of Minutes

Minutes of last meeting were read and adopted.

Dr Fergus on

Dr Ireland Fergus thereafter said that he wished  
to say a few words to the Society regarding Glaucoma  
which was an affection of the eye not easily recognised  
at first sight - He then described Glaucoma in detail  
and said that it was very essential that it should be  
diagnosed as early as possible if operative inter-  
ference was to be of any avail - He also stated  
that an Iridectomy or repeated iridectomies  
should be performed in order to save the eye and  
restore the sight - and concluded by narrating two  
or three cases which had come under his own ob-  
servation. Dr Fergus also showed plates showing

Glaucoma



Dr Fergus on the Condition of the Retina in Liebreich's opht-  
"Glaucoma" halmoscopic Atlas -

Discussion In the conversation which followed -

Dr Gilman, Barras, Russell and Hamilton took part - thanking Dr Fergus for his interesting communication to the Society -

Dr Fergus briefly replied and, in doing so, spoke strongly in favour of strict Antisepsis in Ophthalmic practice -

Dr Gilman's  
"Motion"

Dr Gilman then spoke to his motion of which he has given notice at a previous meeting - concluded by moving "That law ix be altered by the addition of the words "And Governor of the Victoria Infirmary" after the words "Comt Medical" - on the third line of said law." This was seconded by Dr Barras and agreed to after several members had taken part in speaking to the motion.

Dr Brown's  
"Notice of"  
Motion

Dr Brown then gave notice of motion to alter Law VII by the addition of the words "and Governor of the Victoria Infirmary" after the words "Comt Medical" on third line of said law.

Nomination  
for  
Memberships.

The Secretary that Dr John Gordon Wilson No 1 Aytoun Road, Pullahshields had been proposed as an ordinary Member of the Society by Dr Taylor and Gilman -

Society adjourned

James W. M. S. 1890



Meeting XII

11 Bridge St. Glasgow  
5<sup>th</sup> March 1891

Met the Glasgow Southern Medical Society

Chairman

The President in the Chair

Order of

Order of the day: Dr. Arthur Gordon Robertson, Robt  
At Kelly, Ferguson, Service, Thos Russell & Miller

Adoption of  
Minutes

Minutes of meeting held on 19<sup>th</sup> February 9<sup>th</sup> in all  
were read and adopted.

Decision to  
Membership

On a ballot being taken, it was found that Dr. J. Gordon  
Wilson had been unanimously elected an ordinary  
member of the Society.

Midwives  
Bill

It was agreed to take up next the consideration  
of the "Midwives Registration Bill" - presently before  
Parliament.

The Secretary laid on the table some papers, which he  
had received from Dr. Kentoul regarding the subject.  
After a full and free expression of opinion by all  
those members present, in which the very great  
importance of the subject and its intimate re-  
lation to the general medical practitioner, it  
was agreed, on the motion of Dr. Russell to adjourn  
the discussion to a future meeting.

Discussion  
postponed

On account of the smallness of the meeting and  
to allow further time to elaborate his paper the  
Secretary agreed to postpone his paper till the next  
meeting after which the Society adjourned

Paper by  
Secretary  
postponed

James A. Kerr



Meeting XIII

11 Bridge St. Glasgow  
19<sup>th</sup> March 1891

Met the Glasgow Southern Medical Society  
Chairman The President in the Chair  
Sedentary Sedentary:- Dr. Erskine, John Brown, Hamilton, J. Russell,  
J.G. Wilson; A.B. Kelly, M. Murray, Cooper, Robertson and  
Miller - 10 in all.

Adoption of Minutes Minutes of Meeting held on 5<sup>th</sup> inst. were read & adopted.  
Dr Brown then proposed his motion to alter Law VII  
by the addition of the words "and Governor of the Victoria  
Infirmary" after the words "Court Medical" on third line  
of said law - which was seconded by Dr Hamilton & agreed to.

Dr Miller on Dr. Miller then read a short paper by way of intro-  
duction to a professional conversation on the "Rhe-  
umatism of Childhood, with special reference to its  
Sequelae and Treatment." In doing so, he referred  
to its being a very common, and, especially in children,  
a very serious affection in its consequences, either  
immediate or remote, but more especially remote.  
He spoke also of the various manifestations of the  
disease as met with in adults, such as - Arthritis,  
Endocarditis, Pericarditis, Pleurisy and Tonsillitis.  
But in children we find also - Subcutaneous  
Nodules, Chorea and Eczematous Erythema.

He then spoke of its incidence in the sexes. In  
Childhood it is found, out of a number of cases,



Griffiths on taken from the Collective Investigation Committee's report of  
"Rheumatism of the British Medical Journal" that, from 1 to 5 years - boys  
Childhood: preponderate viz 5 to 1: from 6 to 10 years they are nearly  
equal: 11 to 15 years girls preponderate: 16 to 20 male, again  
preponderate. The same thing is noticed as regards  
Scarlatinal Rheumatism.

He then spoke of the influence of Family Predisposition, which  
in Acute Rheumatism, was shown to be very great.

He also referred to the Pyrexia of Acute Rheumatism,  
stating that it was not usually very high, and referred to the  
rarity of Hyperpyrexia, and the few cases recorded by various  
observers. He also spoke of the very serious consequences  
that are apt to follow even a very slight attack, where the  
Arthritis is not even marked, and laid special stress upon  
the early recognition of the disease, because of the tendency  
to attack the Endocardium even before there is any joint  
affection.

He then narrated three cases, which had come under his  
notice - one a boy aged 9 years - with slight joint  
affection - but Endocarditis pretty severe even when going  
about. This boy was first seen on April 16<sup>th</sup> 1888 -  
was attended up till 20<sup>th</sup> June - when he was recovered  
from all arthritis - sent away for change - was  
away six weeks. He was again seen on 7<sup>th</sup> Sept  
same year - when it was found that the heart symptoms  
had increased. He died on the 24<sup>th</sup> October following.



Dr. Miller on The second case was that of a boy aged 15 years, with "Rheumatism of marked Arthritis. Pain - could not turn in bed. Childhood." No Endocarditis to be made out when first seen - which was about 10 days after onset of this illness. Seen from time to time in Sept & Oct. '90 all Arthritis gone. Seen again 4<sup>th</sup> Dec. '90 - when he was found suffering from Chorea which had come on four weeks before. It was unilateral, rightsided. He has also marked Valvular mischief. History markedly Rheumatic. Father has had it three or four times - a sister has had rightsided Chorea also which lasted six months. Two Uncles had also attacks of Rheumatism. The third case was that of a girl aged 11 years. She had Scarlet Fever in February 1890. No Rheumatic symptoms during that illness - Out of doors for first time in the beginning of April. After this began to complain of pains and tired feeling. On June 24<sup>th</sup> she had an attack of Tonsillitis - on 17<sup>th</sup> July was brought home complaining of pains - prescribed for her - but shortly after, decided symptoms set in of Acute Rheumatism. There were signs of Endocarditis a soft mitral Murmur replacing the first sound. Blisters were applied over the cardiac region - when after a time this murmur disappeared. This girl suffered from very severe Urticaria during the attack. Her maternal Grand-



mother had Acute Rheumatism followed by Endocarditis and Heart Disease from which she died 20 years after the attack - suffering for 5 years with special heart symptoms.

He then spoke of the Treatment - Salicylate of Soda alone or with Pot. Bicarb. to relieve the Arthritic pains and to lower the temperature. Keep quiet, rest in bed between flannels.

Blister over the praecordium if any evidences of Cardiac complication. Quinine after the attack has passed off.

When Valvular disease is left, give Digitalis if any signs of failure of Compensation with or without Iron. Attention to the general health of the patient. He stated that he had found that the application of one, two or three leeches over the lower end of the sternum of great value in relieving the right heart when embarrassed. The same was also given at bedtime to give sleep. Caffeine or its Citrate also given as Diuretic and were found of great benefit.

In the conversation which followed all the members took part thanking the Secretary for his communication. Dr. McMurray, Robertson, Russell Brown Hamilton and Erskine specially their experience of Rheumatism as met with in Children and the remedies used.

After Dr. Miller had replied - the Society adjourned.

James Erskine



Meeting XIV

11 Bridge St. Glasgow  
2<sup>nd</sup> April 1891

Met the Glasgow Southern Medical Society.

Chairman

The President in the Chair.

Siderunt

Siderunt:- Dr. Erskine, John Brown, Dr. Lindal, Hamilton, Mr. Cameron, Lane, Gilmore, Templeton, Parry, M'Murray, Clerk, Murdoch, M'Farlane, Workman, Lindsay Stewen, Malcolm Black, J.G. Wilson, A.B. Kelly, Service & Miller.

Adoption of Minutes

Minutes of meeting held on 19<sup>th</sup> March were read & adopted. <sup>20 in all</sup>

Dr. Lindsay Stewen

Dr. Lindsay Stewen then read "Notes of a case of Acute yellow Atrophy of the Liver (Malignant jaundice)" and also showed some microscopic specimens of the same.

Discussion

In the discussion which followed - Dr. Workman, Clerk, and Hamilton took part after which Dr. Stewen replied.

Dr. Lindsay Stewen

Dr. Stewen also read "Notes of a case of Acute - rapidly fatal - General Peritonitis" in a child associated Vulvo-Vaginal Catarrh.

on "Acute general Peritonitis".

In the discussion on this case, Dr. Parry & Brown took part - and the President moved a hearty vote of thanks to Dr. Stewen for his excellent paper given to the Society.

Dr. M. Cameron

on "Tubercle Bacilli"

Dr. J. Wilson Cameron then proceeded to demonstrate the method of examining for Tubercle Bacilli in Sputum as practised in the Pathological Department of the Royal Infirmary.



Dr Cameron on "Inherole Bailli" Dr Cameron also described Biedert's Method. He also enumerated all that was needed for the purpose - and stated the various reagents required.

This demonstration was much appreciated by the members present, and, after Dr Lindsay Stuen had spoken about the ease and rapidity with which the Bailli could now be found in Guttum as compared with years ago when he and others worked at it, blooded for them in vain.

The President moved a vote of thanks for his interesting and instructive demonstration which was heartily given.

There being no other business - the Society adjourned.

James, Esq. Kure



# Meeting XV.

11 Bridge St, Glasgow  
16<sup>th</sup> April 1891.

Met the Glasgow Southern Medical Society  
Chairman Dr Hamilton, Vice President in the Chair.

Order of Business. Order of Business:- Dr Hamilton, Parry, McCameron, McKelly,  
Mr B. Kelly, Russell, Mc Murray, Robertson, Ferguson,  
and Miller - 10 in all.

Adoption of Minutes. Minutes of meeting held on the 2<sup>nd</sup> inst, were read & adopted.

Dr Parry showed Dr Parry then read notes of the following cases:-

Cases

1<sup>st</sup> Case of Complete Paraplegia in a girl aged 7 yrs.  
and showed the patient who has now quite recovered  
the power of sensation and motion after operation.

Dr Parry also showed a strong wire - as well as  
a plaster of Paris jacket which he had devised himself.

2<sup>nd</sup> Case of Fracture of the Skull followed by Convulsions  
Hemiplegia and Aphasia. This was that of a boy  
aged 5 yrs who had been knocked down and run  
over by a cab and taken to the Victoria Infirmary.

This case also ended in recovery - the patient was shown.

3<sup>rd</sup> Case of Intra Cranial Abscess in a man who  
had received a blow on the head from a stone falling  
upon it. Some time after the accident he began to  
complain of pain in the head, which became persistent.

Dr Parry expected to have been able to show this patient  
also, but as he was unwell, he could not be present.

4<sup>th</sup> Case - of Tumor of the Cortex of the Brain, and read



Dr Parry. a few notes of this case as sent to him by Dr M Leod, Hilmar-  
Continued. rock. This man, a labourer, aged 44 years, had complained  
of pain in his head, and had convulsions with Paralysis.  
After recovering somewhat, he was sent to an Asylum,  
but was there only six weeks. After leaving the Asylum, his  
illness lasted for about twelve months when death took place.  
A post-mortem examination revealed the presence of a tumour  
in the brain, which Dr Parry considered was a Glioma.  
Dr Parry showed under the microscope, a specimen of this tumour.

Discussion. In the discussion which took place, nearly all the  
members took part, remarking on the very interesting  
series of cases brought before the Society by Dr Parry,  
and congratulated him on his success obtained in the  
cases. When, on the motion of the Chairman, a hearty  
Vote of thanks was accorded to Dr Parry who  
briefly replied.

James Hamelton



Meeting ~~XVI~~

11 Bridge St, Glasgow  
30<sup>th</sup> April 1891.

Met the Glasgow Southern Medical Society

Chairman

The President in the Chair

Secretary

Present:- Dr. Erskine, Hamilton, Gibson, J. Russell,  
Fryson, Carr, A. Rankin, J. P. Clark, M. Murray,  
Kennedy, Napier, John Glaister, Richmond, Robertson,  
Walls White, Service and Miller . 17 in all

Adoption of Minute, Minutes of meeting held on 16<sup>th</sup> inst, were read and adopted.

Dr. Walls White then read a short paper introductory to  
a discussion upon the "Pharmacy Acts Amendment  
Bill, 1891" presently before Parliament.

Dr. White said that this Bill was being promoted by the  
Pharmaceutical Society to enlarge its powers, & mentioned  
that the part of the Bill most likely to affect us as Medical  
Practitioners was contained in the Sixth Clause. He  
also stated that this clause was contrary to the spirit,  
if not the letter, of the Pharmacy Acts 1868-9.

Dr. W. then stated what has been the custom with  
Medical men since the passing of the Act of 1869,  
and which held good up till last year, when a  
legal decision had been given to the effect "that it  
was unlawful for the unregistered assistant of a  
medical man to dispense for sale a prescription  
containing a scheduled poison" although the man  
convinced was well qualified and compounded



Discussion on the prescription accurately. This new bill goes beyond former "Pharmacy Acts" in that there are no exemptions at all as to the business Amendment Bill of the Medical Practitioner. This bill makes it unlawful for any one but a registered person to compound a medical prescription, no matter how simple it be, and whether it contains a scheduled poison or not. Dr White concluded by saying that we ought to appeal to our various Members of Parliament to use their influence against the Bill; or, if it passes the second reading, then we must have a clause inserted exempting the qualified medical practitioner from its operation as was done by the act of 1869.

In the Discussion which took place almost all the members present took part - Dr Glaister also spoke of Clause II of the Bill, dealing with the Educational part of the subject, objecting to the Compulsory Education for the three years as in the Clause; and, in speaking of Clause VI. said that all seemed to centre upon the proper reading of the word "Supervision" in that Clause.

The great interest taken or shown by the number of those who spoke against the Bill - Eventually, Dr Robertson moved "That it be remitted to the following Gentlemen viz Dr Wall, White, Gilman, Glaister & Robertson, to consider the Pharmacy Acts Amendment Bill 1891, with power to approach Parliament against the Bill by petition or otherwise." This was seconded by Dr Glaister and agreed to.



Nomination for  
Membership.

Dr J. Wells White, Brunalt, Widdington was  
hereafter proposed as an ordinary Member of  
the Society by Dr Hamilton and Miller.

There being no further business the Society adjourned.

James Erskine



Meeting XVII

11 Bridge St. Glasgow

14<sup>th</sup> May 1891.

Met the Glasgow Southern Medical Society -

Chairman Dr Hamilton, Vice-President in the Chair.

Sederunt Sederunt:- Dr Hamilton, Mr Murray, Mr Stewart,  
J. Russell, Malcolm Black, Dr McMillan, Miller - Ginnell.

Adoption of Minutes Minutes of meeting held on 30<sup>th</sup> April were read and adopted.

Election of Members. A ballot was then taken when it was found that Dr  
Walls White had been unanimously elected an ordinary  
member of the Society

Consideration of Pic-nic The Society then took up consideration of the Annual  
picnic. After Dr Hamilton and other members present  
had spoken - Dr Russell moved that it be postponed  
postponed. till next meeting in the hope of a larger attendance -  
This was seconded by Dr Stewart and agreed to.

Professional Conversation Dr Miller then made some remarks introductory  
to a professional conversation upon the "Relative  
Value of Antipyretics in the Treatment of such diseases  
as Phthisis, Pneumonia, Enteric Fever and other  
Febrile Conditions." In doing so, he went over the  
various drugs commonly used as Antipyretics,  
but specially spoke of Quinine, Antipyrin, Antifebrin  
Salicin and the Salicylates, Digitalis. He then re-  
ferred to his experience of the value of Quinine in  
Phthisis with acute symptoms contrasting it with  
Antipyrin which he had also given, pointing out



Professional Conversation on "Antipyretics". The disadvantages of both, but preferring the Quinine when it did not cause too much Cinchonism or cause much gastric disturbance. He also stated that he had recently tried Antifebrin in a similar case, with marked effect so far as the lowering of the temperature is concerned, than with either of the former drugs. He also said that Dr Theodore Williams had recently stated that he preferred to give Antifebrin in those cases with Pyrexia - or Phenacetin where Antifebrin was unsuitable. Dr. Miller also stated his experience of the relative value of Antipyrin and Quinine in Enteric Fever - in that he thought they were of nearly equal value. He also has found Antifebrin of great service in Pneumonia - He had not given Digitalis as recommended by some physicians. He also mentioned that he had not seen any indication of collapse from the use of either Antipyrin or Antifebrin.

Discussion Dr. M. Millan, Russell Stewart, Mc Murray and Hamilton took part in the conversation which followed, each contributing his experience of the drugs in the diseases mentioned - speaking of their value - advising caution - Some referred also to the good to be derived in the reduction from the application of warm water compresses to the abdomen. Dr. Miller briefly replied, after which the Society adjourned.

Hamilton



11 Bridge St. Glasgow  
28<sup>th</sup> May 1891

Met the Glasgow Southern Medical Society  
The President in the Chair.

Order of the night: - Dr. Erskine, Dr. Tindal, Duncan, Barray,  
Mr. Gairdner, Ferguson, J. G. Wilson, H. E. Clark, Gilman,  
Thos Russell, Workman, Downie, Souper, Alex. Rankin,  
A. S. Tindal, Pollack, J. N. Glaister, S. P. Clark, J. A. Wilson,  
E. M. Millan, Murdoch, Hamilton, Wall, White,  
Nathaniel Black, McKnight Wilson, Munro, Wright,  
J. S. Nairne, Robertson, Miller Members - with Dr.  
Dudgeon, Corresponding Member and Dr. A. B. Ness  
and Mr. Gemmell Visitors - 33 in all.

The minutes of meeting held on 14<sup>th</sup> May were read & adopted,  
after which the President rose and said: -

"Before proceeding to the interesting business before us, I  
have to express the sense of sincere sorrow under which  
we are met this evening on account of the death of our  
Treasurer, Dr. Robb, which took place ten days ago.  
At the beginning of this Session we considered ourselves  
most fortunate in securing his valuable services as Treasurer,  
and we looked forward with the good hope of retaining  
them for some years to come. Alas! before the close of  
the Session we are met to deplore his untimely loss.  
Although one of the younger members, he has occupied  
a prominent and even a leading position in the Society.



President's remarks on the Death of Dr Robb. For two years he acted with much zeal and enthusiasm as the Editorial Secretary, and during that term, I had the benefit of his indefatigable services, when he undertook my secretarial duties in addition to his editorial work. Continued. during the greater part of a session, while I was abroad on account of my health. The Society showed its appreciation of his labours by electing him Librarian for the following session. Within the comparatively short period of six years' membership, he has made a very distinguished and honourable record.

The Members of the Society have accorded him their deepest sympathy and tenderest regard during his very distressing illness. Some of them have been indefatigable in their attention to his every want, being only too ready to do the very little in their power and skill to alleviate his suffering. And, for all these kindnesses, no one could have shown more genuine gratitude.

He seemed to be ever careful and concerned lest he was putting any one to unnecessary trouble.

His bright and cheerful smile of kindly recognition was preserved to the very last. He knew his end was coming, and he fought a brave fight with the great enemy of us all.

A deputation from the Council of the Society attended his funeral last Friday, and placed a token of sympathy on his grave in the Southern Necropolis.



Continuation of  
President's  
Remarks

"It is hard to realize that he, who was so full of life and cheerfulness such a short time ago, should have gone from us for ever. His memory will be cherished by the Members of this Society for a long time to come."

Secretary's  
Remarks

The Secretary in further speaking of the great shadow which had fallen on the Society by the sudden and unexpected removal by death of Dr Robb, moved that the Society should express their sense of the very great bereavement which has thus fallen on the Father and family of our deceased Treasurer, and that the following note be expressed in the minutes and a copy sent to Mr. Robb, 8 Carlton Place, S. S.

Letter of  
Sympathy  
to Mr Robb  
& Carlton Place

Dear Sir,

The Members of the Glasgow Southern Medical Society beg to offer their most sincere sympathy with you in the great loss you have sustained by the sad death of your son Richard, after a comparatively short but very trying and distressing illness. Although he was one of the younger members of the Society, he took a leading part in all its work and interests.

For two sessions he acted as Editorial Secretary; and, in the beginning of the present Session, he was unanimously appointed Treasurer. In whatever work he undertook for the Society, he showed much zeal and enthusiasm; and the members can only



now very inadequately express their high appreciation of his past labours amongst them.

His genial and kindly disposition made him a great favourite with everybody. There was an entire absence of all semblance of selfishness and meanness from his character. He seemed to take the greatest delight in doing all in his power for the benefit of others. By the older no less than by the younger members of the Southern Medical Society, Dr Robb will be sadly missed for a long time to come.

With most sincere sympathy - in name and on behalf of the Society

James Erskine, President

Alexander Miller, Secretary.

After Dr. Selman and Mr. Millan had spoken, cordially agreeing with every word spoken by the President and the less sustained by the Society in the death of Dr. Robb this was agreed to.

The President then, in a sentence or two introduced to the Society Dr. Dodgson, of Peking, China, who had come to read a paper entitled "A Modern Chinese Anatomist," being a translation with notes upon a recent work by a Mr. Wang entitled Shi hai too a correction of the errors of the Medical Faculty.



Dr. Dudgeon published in 1850. The first part of the work is taken up with a criticism of the Anatomical Views of the Ancients and the writer's own views of the structure and functions of the viscera. In some points he is clearly in advance of the Ancients; in others, he is quite wrong, and they are right. His mistake in supposing the arterial vessels to be air vessels is his fundamental error, and, of course, vitiates his reasoning. His patient investigations of human anatomy extending over forty years is to be commended, and the spirit of enquiry, altogether foreign to the Chinese mind, is a rare exhibition. A knowledge of the viscera lies at the bottom of all medical knowledge and practice in China. To understand the viscera, it is necessary to understand inspiration, expiration and the Alimentary Canal. He supposes the Carotids to be all depending and embracing our vessels which enter the Heart and are distributed much as we understand the arterial distribution throughout the body. The Veins are properly designated blood vessels; and, in one passage, called returning blood vessels. The circulation of the blood has long been known in China, although the cause of the circulation has been misunderstood.

To make an air and blood circulation possible, an air and a blood reservoir are supposed, the former lodged in the Omestum, the latter



"A modern  
Chinese  
Anatomist." in the Diaphragm.

The position of the Stomach, Pancreas &c are correctly given and he is the first writer to mention the pancreas, under the designation of Tsungti, that which connects and suspends the Stomach, Liver and small and large Intestines. Instead of the juices from the Liver, Pancreas &c entering the intestinal canal and aiding and causing digestion &c, he supposes the juices from the Stomach proceed to the Liver and Spleen.

He supposes a marrow residence into which enters the delicate Chyle to form marrow; the thicker sort goes to the blood receptacle and is converted into blood; and the watery juice passes to the spleen and thence percolates to the bladder.

He insists that the mental Characteristics of man lie in the Brain and not in the Heart, and in the treatment of this, he shows great acumen.

From what has been said it will be understood that his theories regarding the air, blood and pulse are entirely incorrect. He is equally at sea in his discussion as to whether the heart contains blood or not. He argues strongly in favour of the vegetative.

Discussion After Dr Henry E. Clark had spoken referring to the very interesting paper read by Dr Endicott  
Vote of Thanks, The President moved that a hearty Vote



Vote of Thanks  
to  
Dr Dodgeon. of thanks should be accorded to Dr Dodgeon for  
his presence with us this evening and for the very  
interesting and instructive which he has delivered to the  
Society which was heartily given after which  
Dr Dodgeon replied.

The next item of business before the Society - being the  
consideration of the Annual Pic-nic -

The Secretary moved that there be no picnic this year  
this was seconded by Dr Hamilton and agreed to

There being no other business the Society adjourned.

James Erskine



Session 1891-92.

Meeting I.

11 Bridge St.

Glasgow 8<sup>th</sup> October 1891.

Met the Glasgow Southern Medical Society.

Chairman.

Dr. Hamilton, Vice-president in the Chair.

Sederunt.

Sederunt:- Drs. Hamilton, Gilman, E. McMillan, John White, Alex. Rankin, Robertson, J. S. Haines, McManus, Parry, Macintosh, A. B. Kelly, Montgomery, John Glaister, James Dunlop, Jos. N. Glaister, Pollok, A. S. Finkel, Gordon, J. G. Wilson, Barras, Cooper, John Brown, Munro, Walls White, Duncan, Napier & Miller, members, and Dr. J. Grant Andrew visitor. - 28 in all.

Apology for  
President's absence

The Chairman read letter of apology from Dr. Erskine regretting his inability to be present on account of illness.

Minutes of last  
meeting.

The Secretary then read the minutes of meeting held on 28<sup>th</sup> May last, which were adopted.

Letter from  
Mr. Robb.

The Secretary then read letter received from Mr. Robb Carlton Place. It was unanimously agreed that said letter be engrossed in the minutes. It is as follows:-

"

8 Carlton Place

"

Glasgow 21 June 1891.

"

Dear Mr. Miller,

"

"

I am, with all my family, have  
deeply thankful to all the members of Glasgow



" Southern Medical Society, and yourself as Secretary  
" for the grateful, kind, consoling expression of  
" deep feeling and sympathy expressed in your  
" letter of the 1<sup>st</sup> Novr. anent the death of  
" My Dear Son Richard.

" What a very sudden and unexpected stroke  
" of Divine Providence it has been to all of us.  
" In the prime of life, and with so many kind  
" associates in his profession, and all promising  
" well, looking forward to a useful, happy  
" career before him. But alas! it has been  
" decreed otherwise. The blow to us is quite  
" irreparable. We can hardly realize it.

" He was very much bound up in, and for  
" the welfare of your society, in which he took  
" a pleasing deep interest, and seemed quite at-  
" home when aiding for its useful prosperity.

" Please convey to all my deep & heartfelt  
" thanks for the sincere appreciation, esteem  
" and sympathy contained in your letter.

" I am, My Dear Sir

" Yours very sincerely

" (Signed) James Robb.

Treasurer's Statement  
Treasurer then submitted the Treasurer's  
Statement which showed a Balance in Bank  
of Twenty-five pounds, ten shillings & five pence.



Arrears.

He also stated that there were Arrears of contributions amounting to Twenty-four pounds, fifteen shillings owing by fifty-four members, but that he hoped very soon to reduce that amount by the services of a Collector whom he had secured. Dr. Brown was thanked for his satisfactory statement, the adoption of which was moved by Dr. Gilman, and seconded by Dr. Glaister, and carried.

Collector.

Statement

adopted.

Election of

Office-bearers.

The Society then proceeded to the Election of Office-bearers.

For President. Dr. Gilman proposed, & Dr. Pollock

President.

seconded that Dr. Hamilton be elected. This was supported by Drs. McMillan and Glaister, but Dr. Hamilton declined to accept office. Thereafter,

Dr. Barras proposed and Dr. Hamilton seconded that Dr. Miller be elected president. This was agreed to and Dr. Miller thanked the members for the honour conferred upon him.

Other Office-bearers.

The other Office-bearers elected were as follow:-

Vice-president David Couper M.D.

Treasurer John Brown, M.D.

Secretary Chas. E. Robertson, M.B. Ch.B.

Editorial Secretary A. S. Lindal M.B. Ch.B.

Seal Keeper John White, M.B. Ch.B.

Court Medical :- Dr. Estlin (Convener), Dunlop,



Pilmour, Macgilveray and Hamilton.  
Governor of Victoria Infirmary, Dr E. McMillan.  
Extra members to complete the Council, Dr J. C.  
Edmiston.

The next business before the Society, being  
the consideration of arrangements for the  
Annual Dinner, it was agreed that a  
Dinner should be held, and that a Committee  
be appointed to make all arrangements,  
consisting of the President, Vice-president, Secy.  
and Seal-keeper.

The Secretary then read the following proposals  
for membership:—

J. Grant Andrew M.B. Ch. 6 Walnut Crescent.  
Proposed by Drs A. P. Girdell and Miller.

John J. Smith M.B. Ch. 50 Rosslea Drive.  
Proposed by Drs Cooper and McMurray.

Alexander Miller



Meeting 17.

North British Station Hotel  
George Square, Glasgow  
22<sup>nd</sup> October 1891

Met here at Dinner this evening the Glasgow Southern Medical Society.

Chairman & Croupier. The Chair was occupied by the President, and the Vice-president acted as Croupier.

Pedersent. The following members were present:- Drs. Miller, Cooper, Wallace, John Glaister, John Brown, Parry, Wilson, Macintosh, Middleton, McNight Wilson, Ferguson, Duncan, McCall Anderson, McVail, Shaw, Robertson, McMillan, Haddow, Napier, Evoking, Jos. N. Glaister, Russell & Hugh Kelly. Dr. Smith, Turnbull Smith, & Evans & Andrew were present as guests. 26 in all.

Apologies for Absence. The Secretary intimated apologies for absence from Sir George H.B. McLeod, Professor Buchanan, Dr. Lindsay, Henry E. Clarke, James Dunlop, Wood Smith, James Fleming, Lapworth and many others.

Dinner. After Dinner, which was well served by Mr. Ruprecht, the following Toast List was disposed of:-

The Queen & the Royal Family. The President proposed the Health of the Queen & the Royal Family, and the Company responded, by singing together the National Anthem.

Navy, Army & Reserve Forces. The "Navy, Army and Reserve Forces" was also proposed by the President, and this was responded to by Dr. McMillan on behalf of the Navy, and by



Dr. Napier on behalf of the Reserve Forces.  
The Company thereafter joined with Dr. Glaister in  
singing "Rule Britannia".

"Our Society"

The next toast was "Our Society" proposed as  
usual by its President.

"Kindred

Societies"

Then came "Kindred Societies" by Dr. Eoskine  
and responded to by Dr. Middleton on behalf of  
the Medico-Chirurgical, by Dr. Duncan on behalf  
of the "Pathological & Clinical", and by Dr. Miller  
on behalf of the "Obstetrical".

"University &  
Medical Schools"

The Crampies then proposed the "University  
and Medical Schools".

Dr. McGill Anderson responded as representing  
the University, Drs. Glaister & McVail, St. Mungos  
College, and Dr. Parry on behalf of the Western  
Medical School.

"The Youngest  
members"

Dr. McWilliam next proposed the health of  
the youngest members, & Dr. Wilson replied.

"The Ladies"

"The Ladies" was proposed by Dr. John Brown  
& responded to by Dr. Parry.

After this the Secretary read the following  
list of proposed new members:-

Proposed new  
members.

Daniel Laird M.B. Coll. 6 Stonefield Terrace

David M. Smith M.B. Coll. 216 Crown St.

Henry L.G. Leask M.B. Coll. 26 Annette St. Govanhill.

John Stewart M.D. 62 Abbotford Place.



Alexs. Dickson M.B. Coll. 35 Rose St., Garnett Hill.

All proposed by the Secretary & Dr. Brown.

The meeting was then closed. -

Alexander Miller



11 Bridge St.  
Glasgow 5<sup>th</sup> Nov. 1891.

Met the Glasgow Southern Medical Society.

The President in the Chair.

Sederunt :- Drs. Miller, Brown, A. S. Tindal, Montgomery, John White, Wilson Cameron, Parry, A. B. Kelly, Workman, Lindsay Stedman, Gordon, McCall Anderson, & Robertson, members, and Drs. Grant Andrew, Jenkins, Davidson & Bodington, visitors 21 in all.

The Minutes of Meetings held on 8<sup>th</sup> & 22<sup>nd</sup> October were read and approved of.

The resignations of Sir G. H. B. McLeod and of Dr. David Moffat were intimated by the Secretary and accepted.

The following gentlemen were then balloted for and admitted as Ordinary Members of the Society :-

J. Grant Andrew M.B. Coll. 6 Walnut Crescent

John T. Smith M.B. Coll. 50 Roslea Drive.

Daniel Laird M.B. Coll. 6 Stonefield Terrace.

David M. Smith M.B. Coll. 216 Crown St.

Henry L. P. Leach M.B. Coll. 26 Annetta St. Govanhill.

John Stewart M.D. 62 Abbotford Place.

Alex. Dickson M.B. Coll. 35 Rose St. Garnethill.

The Secretary then gave intimation that at next meeting of the Society he would ask when the

Committee appointed on June 19<sup>th</sup> 1890 "to consider the Offer made on that date by Dr. Pollok, and how it could best be given effect to" would be prepared to give in their report.

Professor M.C.  
Anderson's paper.

Professor M. Call Anderson the Lecturer for the Evening afterwards proceeded to read "Notes of some Medical Cases, including (a) Thoracic Tumor, (b) Late Hereditary Syphilis, and (c) Xero. Derm. pigmentosum."

4 Cases.

The Notes referred to 4 distinct cases.

First Case.

Intra-Thoracic  
Tumor.

Symptoms.

The First Case was one diagnosed as Intra-Thoracic Tumor. The Symptoms included pain in the throat & chest, hoarseness which varied in amount, weakness, night-sweats and costiveness. The patient had a good appetite. The pain was felt along the edge of the Sterno-mastoid, and above the manubrium Sterni, and was markedly nocturnal in its nature.

Physical

Signs.

The physical signs included displacement of the Heart to the left, paralysis of the Right Vocal Cord and a cicatrix on the left one. The glands on the right side of the neck and in the axilla were enlarged. Brownish coloured scars existed on the legs and in the right iliac region.

The Tumor was considered to be Syphilitic, altho' no history of Syphilis could be traced.

Treatment.

The Treatment consisted of injection of a drachm



of Mercurial Ointment into the skin daily, but the patient left the Hospital before the treatment was finished.

### Second Case.

#### Late Hereditary Syphilis.

#### Symptoms & History

The Second Case was one of Late Hereditary Syphilis in a girl about 15 years of age. She was blind in early life from Syphilitic Keratitis. There was ulceration of the upper lip and part of the nose. Scars existed at the angles of the mouth. The incisor teeth were rounded at the corners and cleft in the middle. There was a history of an eruption of 4 months duration. Her mother's skin was of a dirty, earthy pallor, and she gave birth to a still-born child immediately preceding the birth of this one. As an infant - this child had Snuffles. Her teething was delayed. There was an offensive discharge from the ears and nostrils, and there was swelling of the neck glands. At one time there was blood in her sputum. Her hearing also was affected. The ulceration began in the septum of the nose, and then attacked the nose itself.

#### Treatment

Koch's treatment - was first tried in this case, without any result, but under Anti-Syphilitics with Iodine and Cod-Liver Oil the resulting success was very great.

The patient was present, and was seen by the members.

Third Case.

Ameyloid  
Disease of the  
Liver.

The Third Case was one diagnosed as Amyloid Disease of the Liver in a man.

There was in this case a history of Epileptic Fits. He had a slightly yellow skin. His stools were sometimes white, and he disliked fat meat although at one time he was partial to it. He often had pain in the Umbilical region, which was easily relieved by a purgative pill. Emaciation was not extreme and the jaundice was slight. He passed too much water, and there was a trace of albumen in it. The liver was greatly enlarged. There was no history of Syphilis or of Suppuration, and the diagnosis was Amyloid Disease.

Treatment.

The treatment consisted of 20 minims of the Tincture of Iodine, three times daily, with good food and regulation of the bowels.

This patient also was present and shown to the members.

Fourth Case.

Xero. derma  
pigmentosum

The Fourth Case was an example of that rare disease Xero. derma pigmentosum.

The patient who was present, was a boy of 13 years of age.

The disease began at 2 years of age as freckles which disappeared in winter, and returned in summer. The freckles in time became black. In 1887 there was an eruption on the face, neck



hands and fore-arms, a coloured illustration of which taken at that time was exhibited by the lecturer.

Within the last 10 months, red spots, cicatrices and warty nodules had appeared, and microscopic illustrations of these warts, which were shown, proved them to be of undoubted epitheliomatous character.

**Treatment.** The treatment adopted, and which was incidentally mentioned by Dr. Anderson as of great service in the treatment of open Cancerous sores, was to sponge the parts with perchloride solution, and to puff them afterwards with a mixture of equal parts of Aristol and powdered Starch.

**Discussion.** In the discussion which followed Dr. Lindsay Stoen pointed out that the affection of the Right Vocal

**Dr. Lindsay Stoen.** Chord in the First case probably pointed to a solid tumour, as in Aneurism it is usually the Left Vocal Chord which is affected - also that Solid Tumours gave pressure effects largely upon nerves. The tumour was in a rare position for a Syphilitic tumour, and the localized glandular enlargements were rather against a Syphilitic diagnosis, for in Syphilis one would expect the glands to be affected all over the body.

**Dr. Parry.** Dr. Parry instanced two cases, and spoke of others which without any history of Syphilis, were Syphilitic in nature, and cured by the administration of

## Iodide of Potassium.

Dr. Pollok.

Dr. Pollok spoke in favour of treating diseased glandular tissue, by destroying it by Chloride of Zinc and afterwards dusting with Iodoform.

Dr. Anderson's  
reply.

In his reply Dr. McCall Anderson referred to Koch's System of treatment. He said that it is very valuable in External Tuberculosis. He stated that there were many cases of cure in Phthisis recorded on the Continent by its means.

Koch's

treatment.

The method to be employed was small doses, seldom repeated, and with very slow increase. He mentioned that the injection of Tuberculin is of very wide application, and he quoted a brilliant cure of a case of Struma by its means.

He also stated that we often get Syphilis without a Syphilitic history, and that this is probably due to the meagreness of the primary sore.

In answer to Dr. McMurray, he stated as his opinion that when treatment by Iodide of Potassium effects a cure, the disease is undoubtedly due to Syphilis.

Report of Com-  
mittee on Phar-  
macy Act Amend-  
ment Bill 1891.

The Secretary next read the Report of Committee appointed to consider the "Pharmacy Act Amendment Bill 1891."

The Report is as follows:—



" Your Committee appointed to oppose the  
" Pharmacy Act Amendment Bill 1891, have to  
" report that, they instructed the Secretary to  
" send intimation to Dr. J. A. Campbell, Dr.  
" Cameron, and J. H. C. Hozier Esq. informing  
" them that at a meeting of this Society on  
" May 14<sup>th</sup> 1891, a resolution was passed con-  
" demning this Bill, that a Committee was  
" appointed, with full powers, to oppose it, and  
" that acting on instructions from this Committee  
" their aid is solicited to have this Bill rejected.  
" The Convener of the Committee Dr. J. Walls White  
" immediately on receipt of Reprints, from the  
" Glasgow Medical Journal, of his paper on this  
" subject, read before the Society, posted Copies  
" thereof to the following Members of Parliament  
" who had given notice of opposition to the Bill,  
" J. H. C. Hozier, Dr. Cameron, Dr. J. A. Campbell,  
" J. Richard Kelly Esq, Sir John Colombe,  
" M. Radcliffe Cooke Esq, and Sir James Bain.  
" Within eight days thereafter, the Bill was  
" withdrawn. The principal reason given by the  
" Convener of the Law Committee of the Pharma-  
" ceutical Society, being, that the Trade in  
" Glasgow for various reasons disapproved of one  
" or two Clauses in the Bill, and so instigated

" Their Members of Parliament to block the  
" Bill.

" As in all probability, this subject will be  
" again brought forward, the Committee  
" should be re-appointed to watch your  
" interests.

" (Signed.) J. Walls White  
" Convenor.

Re-appointment  
of Committee.

Dr. Miller proposed that the Committee be  
re-appointed in accordance with the recommend-  
ation in the Report, and this was seconded  
by Dr. A. S. Findal.

Dr. Brown proposed as an Amendment  
that the Committee be discharged, but as no  
one seconded the Amendment, the proposal  
became the finding of the meeting.

Proposed Honor-  
ary Members.

The following gentlemen were proposed as  
Honorary Members of the Society:—

Sir G. H. B. McLeod, Knt. M.D. F.R.S.E. 10 Woodside Crescent.

William McGwen L.L.D. M.D. 3 Woodside Crescent.

Proposed by the President & Secretary.

Proposed Ordin-  
ary Members.

And as Ordinary Members:—

Samuel Sloan M.D. 5 Somerset Place.

H. M. McHoul, M.B. C.M. Buchanan Villa  
Shawlands.

Proposed by Drs. Miller and Brown.



J. Fraser Esq. M.D. 136 Crown St.

proposed by Drs. Brown & A. S. Findal.

Andrew Davidson M.A. M.B. Ed. Cathcart.

proposed by Drs. MacIntosh & A. S. Findal.

J. Jenkins M.A. M.D. 90 Kenmore St. Pollokshields.

proposed by Drs. A. S. Findal & Brown.

R. J. Halliday M.B. Ed. 10 Clarinda Terrace, Pollokshields.

proposed by Drs. Pollok and John White.

This concluded the Business. —

Alexander Miller

Meeting TV.

11 Bridge St.

Glasgow 19<sup>th</sup> November 1891.

Met the Glasgow Southern Medical Society.

The President occupied the Chair.

Sederunt.

Sederunt:- Drs. Miller, Brown, A.S. Tindal, Templeton, Leask, J.G. Wilson, Ferguson, Carr, Cooper, J.S. Rankin, Laird, D.M. Smith, Wilson Cameron, McEilroy, Hugh Kelly, Hamilton & Robertson, members, and Drs. McHoul, & J.C. Barnes, visitors. 19 in all.

Minutes adopted

The Minutes of last meeting were read and approved of.

New Members. The following of New Members was then balloted for, and unanimously admitted to the Ordinary Membership of the Society:-

Samuel Roan M.D. 5 Laureate Place.

H.M. McHoul, M.B. Ch.B. Buchanan Villa, Shawlands.

J. Fraser Esq. M.D. 136 Crown St.

Andrew Davidson M.B. Ch.B. M.A. Cathcart.

J. Jenkins M.A. M.D. 90 Kenmore St. Pollokshields.

R.T. Halliday, M.B. Ch.B. 10 Clarendon Terrace. do.

Report of Committee

on Dr. Pollok's

offer.

The Report of the Committee appointed on 19<sup>th</sup> June 1890 to consider the offer made to the Society by Dr. Pollok on that date was next submitted by the President.

The following are the terms of the Report:-

" Glasgow Southern Medical Society,  
" 19<sup>th</sup> November 1891.



" Report of Committee appointed on 19<sup>th</sup> June  
" 1890, to consider Dr. Pollok's offer to the Society.

" Your Committee beg to report that having met  
" and considered the remit to them auct the offer of  
" Dr. Pollok to this Society given at the dinner of the  
" Annual Picnic held in Lanark in June 1890, and  
" having pretty fully canvassed the members of the  
" Society, they are of opinion that, as the acceptance  
" of this offer would necessitate a greatly increased  
" subscription, and would also probably cause a  
" division in the Society - a state of matters quite  
" contrary to the wishes or desires of the Donor, the  
" Society should not entertain the thought of its ac-  
" ceptance, and the Committee herewith advises the  
" Society respectfully to decline this offer.

" Your Committee, while advising this step, felt very  
" strongly that it would be a great pity to allow this  
" subject to pass without expressing the hope, that, at  
" no distant date, the idea of a Club for the Medical  
" Practitioners of the South Side especially should not be  
" lost sight of, but that such an undertaking might  
" easily be put into proper shape by us as individuals  
" apart from the Society - the more so, as we found that  
" during our canvas of the members, a goodly number  
" intimated their desire or willingness to become members  
" should such an idea take practical shape.

"The Committee would further desire to express to Dr. Pollok their warmest thanks for the very munificent offer which he thus made to the Society.

Discussion on The Report to Resolution. The President concluded by moving its adoption. The Report gave rise to a good deal of discussion in which Drs. Brown, Carr, Hamilton and Robertson mainly took part, and it was latterly agreed on the motion of Dr. Brown, "That the Report be remitted back to the Committee for further details".

Dr. Miller's papers Dr. Miller then introduced his paper on "The Artificial Feeding of Infants, and the Best Substitutes for Mother's Milk".

He began by noting that the Subject had been brought before the Society by Dr. McMillan six years ago, but being of such great importance to the profession generally, he did not hesitate to bring it before us again.

There are many cases in every physician's practice where some substitute for Mother's Milk must be found. He then gave the Composition of Human Milk, and showed that it passed from the Mother to the Child in a state of slight Alkalinity, sterilised, and at a uniform temperature, which conditions are difficult to obtain in an artificial way. In the Stomach it is changed instantly into flocculent curds.

During the first 3 months of its life, an infant should



Have no starch in its food. Mother's milk contains no starch, and differs from Cow's milk in the amount of Albumenoids it contains. Cow's milk has one-third more albumenoids, is slightly acid, and coagulates in the Stomach into an indigestible curd. The usual proportion given to children after birth is one of milk to three of plain water, or lime water, or barley water.

Swiss milk does not coagulate in the Stomach, but there is a want of fat in it, and the child is pale and flabby after its use, owing to the large quantity of sugar it contains.

The lecturer then spoke in favour of Franklin's method, which consists in curdling by means of Rennet one or even two-thirds of the milk, in this way reducing the Casein; and afterwards educating the stomach gradually to tolerance of albumenoids.

Peptonising the Cow's milk by Savory & Moore's or other preparations was next referred to, the objection to peptonising being, that there was no work left for the Stomach to do, and atrophy would probably result.

The Death-rate of Infants from Gastric & Intestinal Catarrh was in most cases a death-rate due to improper Feeding.

Most infants can be reared on cow's milk, but there

are some with whom it will not agree in any form whatever, and this constitutes a most serious difficulty.

Dr. Miller then referred to some of the Artificial Foods. Nestlé's Food contained some starch unaltered to dextrine. Mellin's Food is better than some, contains less starch. Carrick's Soluble Food contains a lot of unchanged starch and less Fat than Nestlé's.

He then spoke against putting faith in Advertisements emanating from the proprietors of these or other foods, and suggested the desirability of a Committee of the Society analysing the different foods at present before the Profession.

In conclusion he advised that whatever Food be selected for use, there should be added to it whatever constituents it required to bring it up to the standard of Mother's milk. And in his opinion the following mixture was the nearest approach to such a food:—  
Cream 16% fat 1½ ounces: Milk 1 ounce; Water containing milk sugar in the proportion of 18 drachms to a pint of water—5 ounces. This should be steamed, not boiled, and half an ounce of lime-water to a pint of the mixture may be added as desired.

#### Discussion.

In the discussion which followed, Dr. Hamilton reviewed the paper generally, and advised that Cow's Milk for use in Infant-Feeding should always be boiled, just after it was received.



Drs. Wilson and Leach also made a few remarks, the latter recommending Raw Meat Juice in certain cases, and in others Boiled Cow's milk diluted with barley-water to prevent coagulation.

Dr. Miller briefly replied: and afterwards,

Suggestion of  
Committee for  
Analysis of  
Foods.

Dr. Hamilton proposed that as a result of the President's suggestion the Society should consider the propriety of forming a Committee on the lines suggested in the paper.

This concluded the business, and the meeting was dissolved.

Alexander Miller

Meeting V.

11 Bridge St.

Glasgow, 3<sup>rd</sup> Decr. 1891.

Met the Glasgow Southern Medical Society, the President in the Chair.

Minutes approved. The minutes of last meeting were read and approved of.

Present: Dr. Eoskine, Gilman, Jas W. Wallace, Rutheford, J. G. Wilson, D. M. Smith, John Stewart, Francis W., Grant Andrew, A. B. Kelly, Brown Miller, A. S. Lindal, & J. K. Kelly, 14 in all.

Death of Dr. White. Before proceeding to the business of the meeting Dr. Miller referred to the death of Dr. White, which had taken place since the previous meeting of the Society, in a graceful and feeling manner, and explained that the Council had met, and decided that a wreath should be sent, and that the President should represent the Society at the funeral.

Dr. Miller said that he had attended the Committee on Funeral, and that Dr. Gilman was also present. Committee on the Subject.

It was agreed by the Society that a Committee consisting of Drs. Miller, McMillan, and Gilman be appointed to draw up a suitable notice of the death of Dr. White.

Electd as Honor. Dr. G. H. B. McLeod & Dr. William McGowan were thereafter unanimously elected as Honorary members.



## Members of the Society

Resignation of  
Dr. Buchanan.

A letter was read from Dr. George Buchanan resigning the Ordinary membership of the Society. Dr. Gilmore proposed and Dr. Killes seconded that he should be made an Honorary member.

Dr. A. Brown

Kelly's paper.

Dr. A. Brown Kelly then read his paper on "Suppuration in the Antrum of Highmore", and showed specimens and instruments.

In the first place Dr. Kelly indicated the anatomical relations of the Antrum of Highmore by means of moist preparations and illustrations. He then passed to the consideration of the Subject proper, which he said had received insufficient attention.

In support of this statement he read extracts from letters which had recently appeared in the Lancet.

The two conditions of Suppuration in the Antrum, and Empyema of the Antrum were contrasted. In Empyema the cavity is filled with pus which cannot escape, owing to closure of the normal opening between the Antrum and the nose. In Suppuration, on the other hand, the orifice being open, the pus escapes freely.

Empyema has been long known. It is characterized by signs which point distinctly to implication of the Antrum e.g. pain, and swelling of the cheek. Later, perhaps distension of the cavity, manifested by exophthalmos, nasal obstruction, or convexity of the hard

palate on the same side, and ultimately one of the walls may give way, and a fistula be formed.

Suppuration in the antrum on the other hand was first recognized in 1886, although it is by no means rare. The symptoms are very obscure, and only point to the antrum in an indirect manner.

The remainder of the paper was devoted to the consideration of Suppuration in the Antrum.

The affection was shown to arise either from diseased teeth, or by extension of Catarrhal affections from the nose. The rarer causes were also mentioned.

The chief symptom - and it is for relief of this that medical aid is usually sought - is a unilateral, purulent nasal discharge. The other symptoms are most frequently headache and digestive derangements. On examining the nose, pus as a rule is found below the middle turbinate bone, opposite the dental orifice.

owing to the symptoms being so vague it is often a difficult matter to make a diagnosis, and to illustrate this two cases were described.

A great many methods have been introduced as aids to diagnosis. Of these transillumination and aspiration are the most convenient and reliable. Transillumination is carried out by making the room perfectly dark, and then placing in the patient's mouth a small incandescent lamp. Under normal conditions the light shines through the cheeks,



and a small tache beneath the eyes corresponds to the Antrum. The various causes which may intercept the light, e.g. pus or a solid tumour were mentioned, also the manner in which fallacies may arise in using this method.

Aspiration of the Antrum was next explained, and it was shown how it was an easy matter to pierce the Antrum from the nose, and how on the whole this is the surest test.

A number of other diagnostic methods were noticed. In treating Antral Suppuration, it was recommended, seeing these cases often run on for months, that the Drainage passage be made from the mouth, & thus the treatment may be left largely in the patient's hands. The advantages claimed for the intra-nasal operations were mentioned.

In the course of the paper, the anatomical details - as to etiology, density of walls &c. - were explained by reference to moist preparations. The lamp used in transillumination, the aspirating syringe, a trochar for opening the antrum, canules for washing it out, an insufflator, and various other instruments were exhibited.

At the close of the paper, the method of transillumination was demonstrated, 1<sup>st</sup> on a healthy individual, and 2<sup>nd</sup> on a patient suffering from Antral Disease.

Dr. Miller said he was sure we were indebted

Transillumination

Discussion

Dr. Miller. to Dr. Kelly for his paper, specimens and exhibition with the Comp. We had listened with great pleasure to his paper. It was strange, he said, that diseases of the nose had been so late in being studied. We were proud to have such a specialist among us. The absent members had missed a treat.

Dr. Eoskine Dr. Eoskine said This was one of the best papers he had ever heard read before the Society. The phenomenon of translucence was wonderful. The subject was useful to him, as in treating the ear, he came across difficult cases of throat-mischief. The nose deserved the attention it was now getting.

Dr. Gilman Dr. Gilman also made laudatory remarks. Looking at the preparations, he was surprised at the difference in thickness of the bones of the different specimens. He expressed thanks for the hints thrown out. Dr. Kelly was the worthy successor of his father.

Dr. Wilson Dr. Wilson was greatly interested in the anatomical specimens. He thought Dr. Kelly was rather diffident in describing his own treatment. He would like to know Dr. Kelly's opinion of Hartman's Cannula. Hartmann had splendid results.

Dr. Andrew Dr. Andrew thanked Dr. Kelly for his paper. He was especially interested in the anatomical specimens. He had seen suppuration in the Antrum caused by a pledget of cotton. The suppuration ceased when the



cotton was removed, and the cavity washed out.

Dr. Rutherford thanked Dr. Kelly for his paper. He was glad to have seen some of Dr. Kelly's results. The foundation Dr. K. had laid was of the most promising kind. If anything, he had been diffident in telling us of his own procedure. Illumination was quite new to him. It reminded one of illumination applied to other points. This was an illustration of the development of a method which cannot but be of value.

Dr. B. Kelly's

reply

Dr. Morn Kelly returned hearty thanks to the members for the manner in which they had received his paper. He did not think much of Hartmann's treatment. It was all very well in Germany where patients would attend daily. He thought it better to put a drainage tube through the abscess.

This concluded the business.

Alexander Miller

Meeting VI.

11 Bridge St.  
Glasgow 17<sup>th</sup> Decr. 1891.

Met the Glasgow Southern Medical Society. - the  
president in the chair.

Present.

Present - Drs. Miller, Brown, Parry, Grant, Andrew,  
A. S. Lindel, Davidson, Wilson Cameron, Stewart,  
Glasgow Dr. Gilman, Brown Kelly, S. P. Clark, Compton  
and Robertson.

Minutes.

The minutes of last meeting were read and approved, after which the Secretary read a letter from Sir S. H. B. de Leeuw conveying his thanks to the Members for his election as an Honorary Member of the Society.

Report on the

Death of Dr.

John White.

The Report by the Committee appointed to draw it up, in reference to the death of Dr. John White was presented by Dr. Gilman who read as follows: -

"It is with unfeigned regret that your Committee have  
"to record the death of Dr. John White, Orcadia, Pollokshields,  
"who succumbed to acute Pneumonia on Sunday 29<sup>th</sup> November  
"1891, at 2.10 a.m. in his 30<sup>th</sup> year.

"This is the first instance in the history of our Society,  
"where a member, who was also the son of a member, has  
"been taken away. Dr. White's father was one of our earliest  
"and most zealous members, being connected with the Society  
"in which he filled with dignity and conspicuous ability, every  
"office except that of Treasurer for a long period of years.

"Dr. White gave by his attendance, and contributions of



"notes and Cases, every promise of following worthily in  
"his father's footsteps. Joining our ranks during the Session  
"of 1888, he took from a very early period an active part  
"in furthering the objects of the Society, and in increasing  
"its Membership. His zeal and activity were soon recognized  
"and he was made a member of Council, and in this  
"capacity and in the various Committees to which he gave  
"ungrudging help, his services were invaluable. At the  
"Annual Meeting in October he was unanimously elected  
"Seal-keeper, and one of his last appearances in public  
"was at a Committee Meeting of this Society.

"Of no one could it be said more truthfully than of  
"Dr. White, that whatever his hand found to do, he did it  
"with all his might. There was a prompt decisiveness  
"and energy about him which promised well for his success in  
"the battle of life, as it had invariably ensured success in  
"whatever he undertook. His character and temperament  
"were quite frank and genial. He was outspoken to a fault,  
"but gentle and kindly at heart, and full of an exuberant  
"buoyancy and vivacity, which endeared him to all his friends,  
"and rendered him a most agreeable companion and colleague.  
"He was liked by every one: a welcome guest in every company  
"and we shall long miss his presence from our midst, and  
"lament his loss.

"The history of his last illness is a brief one. He had  
"been feeling out of sorts on several occasions during the

"Autumn and early part of the winter, and kept indoors  
"for some time in October, and seemed to have completely  
"recovered, but shortly after resuming professional work  
"he caught a chill and was again laid up. Symptoms of  
"Catarrhal Pneumonia - the disease of which his father  
"died - soon supervened, and in spite of the most constant  
"and tender nursing, and the professional services of his  
"friends Drs. Montgomery, Wallis White and Gilman, with  
"Professor McCall Anderson in consultation, he grew  
"steadily worse, and died on the evening of the 9<sup>th</sup> day  
"without a struggle.

"Cut off thus early in the dawn of a Career, which  
"seemed likely to be one of increasing usefulness, and  
"happiness and honor, he has left a blank at home  
"which never can be filled.

"We beg to record our deep and earnest sympathy with his  
"young widow, in her great bereavement, and with his two  
"little ones left fatherless, and our sincere condolences with  
"his mother, who has now to mourn a Son as well as a  
"Husband departed this life, within a few years of each  
"other, and laid in that quiet grave, from which their  
"skill and care had often succeeded in rescuing others  
"superior.

(Initialed) J. F. G. 9-12-91.

It was agreed on the motion of Dr. Miller that Copies of  
the above report be sent to the widow and mother of the late



Dr. Parry's  
paper.

Doctor White, and also to the Glasgow Medical Journal.

Dr. Parry then read his paper, which was divided into two sections.

In the first place, he showed a Sarcomatous Tumour removed from the upper jaw of a boy, with microscopic sections of the same, and also a cast in wax of the cheek before removal of the tumour.

The history of the case showed that the tumour had been previously lanced, but only blood had escaped from the wound. On admission to the Victoria Infirmary the tumour, which was of the size of a walnut, was dark and ulcerated, while the skin on the cheek was healthy, but with a fulness extending to the eye.

In removing the tumour, sufficient bone was left to support the eyeball, and the operation was very successful, as the eye was not shifted, and the parts were in a healthy condition six months after. Dr. Parry mentioned that 3 years would require to elapse before the condition could be considered as cured.

Under the microscope the tumour was shown to be a Myeloid Sarcoma with the following characters:— At the base were spindle cells, showing the tumour to be hard and slow-growing. (It had been 8 months in existence). There were giant cells present showing its chronic nature. There was a layer of pigment beneath the mucous membrane, hence the tumour was portwine-coloured, and lastly, there

was a Cyst.

Dr. Parry said he had intended this case to be an introduction to a discussion on Sarcomatous Tumours. Sarcomatous Tumours, he explained, included both Round Cells and Spindle-celled tumours, but only in the latter which were often encapsuled, were operations ever satisfactory.

Several cases were afterwards quoted in which the diagnosis had been severally Abscess, Tubercular Osteitis, Nævus, and Peritonitis, but all of which had proved to be Sarcomatous growths.

Discussion.

Dr. Gilman.

In the remarks following this first section of the paper, Dr. Gilman referred to the removal of the jaw for Phosphorus poisoning and wanted hints other than history for the diagnosis between Abscess and Sarcomatous tumours.

Dr. Cooper.

Dr. Cooper quoted two cases of Sarcomatous Tumour, one of fluid in the knee-joint, and another in which the Tibia was amputated, but where the disease recurred in the stump.

Dr. Grant-Andrew.

Dr. Grant-Andrew quoted a case in the Western Infirmary where there was pain over the kidney, where the diagnosis was not made out, but which proved to be a Sarcoma.

Dr. Brown.

Dr. Brown referred to notes he had made of cases in the Royal Infirmary during 1890, in which the Clinical diagnosis in relation to Sarcomatous tumours had not been well borne out on the Post-mortem table.

Dr. Brown Kelly & others also spoke, and Dr. Parry replied.



The Second part of Dr. Parry's paper was on the "Treatment of Fractures of the Femur without splints."

He was indebted to Dr. McLeod of Kilmarnock for the idea, which he had carefully worked out experimentally, and with very satisfactory results.

The treatment consists in doing away with the Long Splint altogether, and simply, by means of extension and rest, allowing nature to heal the breach.

The results arrived at in treating Fracture of the Femur successfully are three, namely, No deformity, No shortening and getting union, and by means of Sticking-plaster, a Reel with knitting-needles, and a bottle of water, Dr. Parry maintained that as in all cases he had treated, quite as good results may be obtained as by the orthodox method of treatment. He said that the Long Splint often causes displacement by shifting, and that when the limb is put up in Plaster of Paris, we may sometimes get displacement with non-union as a result.

In treatment by this extension method, the muscles themselves fix the fragments.

Several members took part in the discussion following and Dr. Edmund remarked that this method certainly constituted a great improvement in treatment, but doubted if, in a bad result, without the sanction of the heads of the profession, mal-practice would not

he alleged.

At the conclusion of the paper, Dr. Parry showed a Spinal Jacket made on a new plan, which was greatly admired by all present.

Dr. J. D. Bertram, Orcadia, Pollokshields was then proposed as a member of the Society by Drs. A. S. Lidal and Davidson, and the meeting closed.

Alexander Miller



Meeting VII.

11 Bridge St.

Glasgow 7<sup>th</sup> January, 1892.

Met the Glasgow Southern Medical Society, the President in the Chair.

Present. Drs. Millar, Gilman, Robertson, Cooper, Walls White, Turnbull Smith, Jenkins, A.C. Findlay, Brown, Chaister, Sloan, Nairne, Kelly, Milroy and St. Clair Gray.

The minutes of last meeting ~~were~~ read and approved of, after which Dr. J.D. Besterman, Coeditor Pollokshields was unanimously elected a member of the Society.

The Secretary read a letter from Mrs White acknowledging receipt of the Report sent to her regarding her late husband, expressing her heartfelt thanks to the Society for the same, and also for the wreath sent on the occasion of the funeral.

Dr. Milroy then read his paper, 1<sup>st</sup>, "On an Ovary in a state of Cystic Degeneration", and 2<sup>nd</sup>, "On a supposed Tubal Gestation Sac."

He showed a number of beautiful microscopic sections of both the Tumours, and used these as illustrations of the paper while he proceeded.

The first tumour was an enlarged Ovary measuring 8 $\frac{1}{2}$  inches at its greatest circumference, and 5 inches at its smallest. About 2 $\frac{1}{2}$  inches of the Fallopian Tube was

attached, and a well marked Hydatid of Morgagni was present. Microscopically, the tumour was seen to consist of 3 parts: externally, a strong, thick capsule, consisting of the layers of the broad ligament; internally a brittle mass of degenerated Sarcomatous matter; and between, a transitional zone of tissue with a few cysts and small nodules in it, which could be seen shining through the capsule. The patient was suffering from Sarcomatous degeneration of the Ovary. The degeneration, said the lecturer, commences in the cells lining the membrana granulosa, but no one knows what morbid influence causes these cubical cells to give birth to such an illegitimate progeny. He believes that the living cells do manufacture the round cells, and this opinion confirms that of Foulis, that round cells are meso-blastic in origin, for a meso-blastic cell as a parent will reproduce nearly every other shape of cell as well as those found in the mass of his tumour.

#### Second Tumour.

The Second Tumour was a Cyst which had been cut into two parts, and which when put together were about the size of a Tangerine orange. On one side, the Fallopian Tube was seen entering the cyst, and on the opposite side, were the fimbriae marked together. The Ovary was present with a nearly healed Corpus luteum on it, and the whole specimen, although it had been in spirits for months, was of a dark brown



clot. This last fact, according to Dr. Milroy pointed strongly towards a Syphilitic condition. The wall of the Cyst varied in thickness from  $\frac{1}{8}$  to  $\frac{1}{4}$  of an inch, was bare internally at some parts, and at others was lined by a partially organised blood clot, and its consistency was almost of the toughness of leather. Even in the absence of a focus, Dr. Milroy did not hesitate to pronounce it a Gestation Sac, formed of the walls of the Ampullar end of the Fallopian Tube, and he believes that had he received the tumour unbroken, he would have found within it an apoplectic ovum such as that, of which he exhibited a sample, from another case. Gestation had been asserted, and judging from the appearance of the tumour, and from the fact that Syphilis often causes the death of the foetus in Tubal Gestation, probably from Syphilis.

Had Dr. Milroy found a Carneous mole within the Cyst, the Chorionic Villi would have been easily shown, and would have proved beyond doubt that the Cyst was an old tubal gestation sac, but in the absence of that, attention had to be directed to the blood clot lining it. This formed a brown line about a centimetre thick, and was in Dr. Milroy's opinion the Internal Vascularization zone. The mention of this zone led him up to the discussion of a Decidua being present in such cases.

Internal to the brown line were large globular cells

in a state of fatty degeneration, which he considered were decidua cells identical with those found in the Uterus after the Vitalized Ovum has taken up its abode there, and by whose endosmotic action, the ovum in this cyst had at one time been nourished. He quoted 6 eminent authorities who say that the Decidua always lines the gravid cyst, and 6 again who maintain that it is always formed in the uterus. He also mentioned 3 others who told that it is sometimes found in the uterus but not always.

Dr. Kilgus believes that a Decidua is formed in Tubal pregnancies, a decidua playing the same part in the Tube which the Perimetrium does in the Uterus. Two things only are required to give rise to decidua cells viz. a vitalised germ, and a healthy surface of submucous connective tissue. Both these conditions may easily be present in the Fallopian Tube, if we suppose the Sub-mucous tissue there to be in a healing condition after Salpingitis for example, or even after an inflammation there as several authorities maintain.

The lecturer considered the present case to be of this class, but even where there is no Salpingitis in the tube, gestation he says can still proceed, but with a difference in the character of the decidua cells. In this case the process is analogous to normal gestation in Cats and Dogs, the folds of the human fallopian tube representing the folds of



mucous membrane in the Uteri of these animals. And if, as Evcoliain says, "It is settled beyond doubt that in these animals a Serotinia exists", how can it fail to be present in Human tubal pregnancy if the Placenta is there developed as in Cats and Dogs.

After the paper was finished Dr. Stuart Nairne made a few remarks regarding the Clinical History of the Cases.

Regarding the first case, he said it was a Case of Dr. Johnston's, and in his absence he did not feel warranted to say more than that the Diagnosis had been a fibro-cystic tumour and that the woman recovered after the operation.

The History of the Second Case he gave in full. The woman was married two years ago, and had not been well since her marriage. She had had Pneumonia, but got better and became strong again. At her periods she had excessive pain, and her doctor diagnosed ovaritis as the cause. After her marriage she had Syphilis, her husband being a sufferer from that disease. She missed one period, and then she became subject to fainting fits, great pain over the abdomen, and a feeling of being "like to burst". She was then treated for peritonitis and metritis. Under Chloroform a fibrous tumour was diagnosed, and she came to Glasgow for operation. The operation was difficult, on

account of the numerous adhesions. There was much bleeding, both of pure and of putrid blood, followed by collapse due to the hæmorrhage, but in the end the woman recovered.

Dr. Milroy's paper gave rise to eulogistic remarks on the part of all who spoke, Dr. Glaister especially praising the lecturer for his good pathological work, and for his new investigations in new fields of labour, connected therewith.

Dr. Sloan quite agreed with Dr. Milroy in his idea of the Decidua being present in the Fallopian Tube.

Dr. Miller proposed a vote of thanks to Dr. Milroy for his paper, and Dr. Milroy briefly replied.

The meeting then proceeded to consider the Report of the Committee on Dr. Pollok's offer to the Society.

The Report by the Secretary as follows:—

" Report of the Committee appointed  
" to consider Dr. Pollok's offer to Furnish Premises  
" for the use of the members of the Glasgow Southern  
" Medical Society.

" During the recess of 1890. Dr. Robert Pollok, who was then  
" President of the G. S. M. S. made an offer to the Members  
" of Council to equip and furnish a Suite of Rooms for the  
" use of the members, wholly at his own expense and with  
" no other conditions than that the Society should accept  
" and maintain them. This generous proposal was very



"favourably received by the members and by the Office-bearers  
"but in the course of discussion and conversation it soon  
"became evident that its acceptance would involve so many  
"and great changes in the conditions of membership that the  
"whole matter would require to be very thoroughly and care-  
"fully examined.

"Accordingly on 5<sup>th</sup> August 1890 a meeting of Council was  
"held at which Dr. Gilman was appointed Secretary of a Com-  
"mittee of the whole Council with power to add to their numbers  
"to call personally on every member of the Society, and  
"state to them the nature and bearing on the future welfare  
"of the Society of Dr. Pollok's munificent offer; to ascertain  
"the feeling of each member on the matter, and to urge  
"on them the imperative necessity in view of its acceptance  
"of at least doubling the present Annual Subscription.

"It was clearly expressed by the President, and kept constantly  
"in view by the Committee that the proposed gift was to  
"the Glasgow Southern Medical Society itself, and not to  
"any new or modified Club, society, or other body willing to  
"accept furnished apartments gratis, and live off, so to speak,  
"from the parent's Stew. Nothing was to be done, which would  
"in any way, directly or indirectly, divide the interests of the  
"whole body of members.

"An almost complete canvass was made by the Committee  
"acting in pairs during the autumn, although owing to  
"holidays, illness and other causes, this could not be

" wholly attained

" The results, on being submitted to later meetings of the  
" Committee, showed the existence of a very considerable  
" diversity of opinion, as to the advantages of the proposed  
" change. 45 members were quite in favour of the scheme,  
" and were willing to join the re-constituted Society,  
" and pay an annual subscription of £1/- . 8 members  
" were willing to do the same, provided the subscription  
" did not exceed 10/6 . 6 were decidedly adverse to  
" any change. Of the remainder, amounting to more  
" than one-half the total membership of the Society  
" declined to give any definite promise, pleaded for  
" delay and patient consideration of the question, or  
" indicated a leaning towards resignation, in the event  
" of the annual subscription being raised.

" The expense of maintaining premises of a character and  
" appearance which would be creditable to the Society, even  
" if fitted up free of cost, and handed over to the  
" proper office-bearers or to the Trustees, would not, it is  
" estimated, be less than £100 per annum, for rent, taxes,  
" caretaker, magazines, light and fire. This was quite  
" double the amount which the Committee could count  
" upon from subscriptions. It was plain also that members  
" who declined to join the re-constituted Society, would be  
" placed in an awkward position, would indeed be  
" wronged, if they were compelled to leave us, while



"to make two classes of members paying different amounts  
"of subscriptions, and with privileges differing accordingly,  
"would not only be invidious, but might lead to  
"friction and trouble in the management of the Society's  
"affairs.

"In these circumstances, and as the result of many  
"meetings and much consideration, the Committee have  
"finally resolved, that in the meantime the change  
"should not be gone on with, and that Dr. Pollok's very  
"kind offer be, not declined by any means, but with  
"his sanction be postponed time die, or until by the  
"operation of the changes and vicissitudes which time  
"brings to all of us, the increased strength and  
"financial prosperity which every year's balance-sheet  
"shows in our affairs, shall become great enough to  
"justify the members in taking upon themselves the burden  
"of this important change, which we have found too  
"heavy to carry to a successful issue.

"The Committee cannot conclude without expressing  
"their appreciation of Dr. Pollok's motive and intention in  
"making this generous offer to the Society, the ready and  
"cordial manner in which he met their wishes in all  
"matters of detail, and the evident sincerity of his  
"desire, to increase the influence, importance and useful-  
"ness of the Glasgow Southern Medical Society, and to  
"hasten the time when, in the words of our original

"secretary," the small acorns of our first beginnings  
"may expand into a great oak, and the tiny  
"streamlet of our origin" nearly fifty years ago, become  
"a majestic river."

(Initialed) J. F. Gilman

7-1-92.

Dr. Elaieter thereafter moved the "postponement  
of consideration of this Report till next meeting, the  
report then to appear as the first business on the  
Billet", which was seconded by the Secretary.

Dr. Brown moved that the Report be adopted,  
and this was seconded by Dr. Jenkins. Dr. Jenkins  
afterwards explained that he had seconded the amend-  
ment in error, and desired to withdraw, but the  
mover demanded a vote, and as only the proposer  
voted for the Amendment, the motion was declared  
carried.

This concluded the business.

Alexander Gilbert



Meeting VIII.

11 Bridge St.

Elasgar 21<sup>st</sup> January 1892.

Met the Elasgar Southern Medical Society, the President in the Chair.

Present, Drs. Miller, Duncan, Maylard, Hamilton, H. Kelly, Pollok and Robertson, Fraser Dr., A.S. Lindal and McMurray.

The minutes of last meeting were read, and approved of.

The Report on Dr. Pollok's offer was then read, and after an explanation by Dr. Pollok as to his intention at the time he made the offer, and as to his present desire regarding it, it was agreed, on the motion of Dr. Duncan, seconded by Dr. Hamilton, that Dr. Pollok be thanked for his offer, but that the Society cannot see their way to accept of it.

A vote of thanks to Dr. Pollok for his offer was then proposed by Dr. Miller, and was heartily accorded by the meeting.

Dr. Maylard then made a few remarks on the "Treatment of Varicose Veins by excision".

In the course of a most interesting paper, it was explained that the treatment was not new, and that it was condemned as dangerous by many good authorities from the risk of Septic poisoning.

Dr. Maynard holds however, that with the necessary preparations, and care during the operation, no more danger may be apprehended than in any other case.

The ulcers and sluggish tissue surrounding them are first treated by daily massage until they are in a healthy and healing condition, and before the operation the surface of the ulcer is cleansed, and the skin prepared as usual.

One of the patients on whom Dr. Maynard had operated was present. Eight inches of the Internal Saphenous Vein of one leg had been excised. The ulcer shrank on the day following the operation, the skin gradually shrank, and the wound healed by primary union.

Several other cases were quoted, especially one in which 4 inches of the Internal Saphenous Vein in both legs had been removed, and in all which cases the operation had been quite as satisfactory, as in that of the patient before us.

In the remarks following the conclusion of the paper, Drs. Duncan, Sollok, Miller and Robertson took part, and all expressed their thanks to Dr. Maynard for his paper.

This was all the business. —

Alexander Miller



Meeting IX.

11 Bridge St.  
Glasgow 4<sup>th</sup> Feby. 1892.

Met the Glasgow Southern Medical Society, the President in the chair.

Present, Drs. Miller, John Brown, D. Lindal, Clouston, Ferguson, J. G. Wilson, Carr, Fraser Orr, Jenkins, A. S. Lindal, A. Rankin, Russell, King, McMurray, Bertram, Cooper, Halliday, Parry, Duncan, Robertson, members; and Dr. J. C. McVail, A. Campbell Munro, and Joseph Scanlan, visitors.

The minutes of last meeting were read and approved of, and Dr. Duncan then introduced a discussion on "The means by which the Tubercular Bacillus is spread, and what may be done to prevent its dissemination".

He began by mentioning that the Subject had already been before the Glasgow Medical & Surgical Society, with the result that a memorial had been sent to the Town Council calling Tuberculosis an infectious disease.

The subject was treated by Dr. Duncan under 3 heads, 1<sup>st</sup> The extent of the evil. 2<sup>nd</sup> The means by which the disease is spread. & 3<sup>rd</sup> The means to be adopted to prevent its spread.

Under the First heading he stated that there were 1900 deaths annually in Glasgow from all the Tubercular diseases, and of these 1400 died of Phthisis Pulmonalis.

He maintained that the Town Council memorialists had exaggerated the extent of the evil, and that no man is justified in forming conclusions in this matter from post mortem examinations or from Hospital statistics.

Dr. Duncan was not certain that he had ever seen direct infection from Tubercular disease, and certainly not in his experience from Tubercular Meningitis.

Out of 16 cases which he quoted only 3 had a probability of infection, and in all these cases small houses, hard work, and constitutions reduced by constant nursing of the weak had a large share in the production of the disease.

Tuberculosis is certainly infectious, because it can be injected into animals, but the bacillus is difficult to propagate.

To prevent its dissemination Dr. Duncan advises that in hospitals the Sputa should not be carelessly treated. The bacilli are not in the breath, but are in the spray of coughing. He blames milk and tubercular meat as the sources of much infection and suggests as reforms:-

1<sup>st</sup>. That all byres in Glasgow be abolished.

2<sup>nd</sup>. That the inspection of the meat market should be thorough.

And 3<sup>rd</sup>, That although there are no means at present to prevent the sale of tubercular milk, he would advise that all milk used should first be boiled, and that.



all meat should be thoroughly cooked before being eaten.

For families with hereditary tendencies, he would advise living in sparsely populated districts, Glasgow to these people being a dangerous habitation.

Dr. Munro, Medical Officer for Renfrewshire, homologated the remarks of Dr. Duncan in reference to the small degree in which Tubercular Disease is infectious. He then referred to meat inspection, and the necessity of licensing all Slaughter-houses. He considers proper Ventilation as the most important method connected with the prevention of Tubercular Disease.

Dr. McVail, Medical Officer for Stirling & Dumfries then spoke. He referred to Clay soils, rainfall, certain kinds of houses, heredity and occupation, all as bearing on the infectivity of Tubercular Disease. He showed that in Kilmarnock where the houses had improved, there was lessening of the Disease. He believes that Tuberculosis is more infectious than Dr. Duncan admits. He is in favour of notifying Tubercular Cases, but is afraid that the effect on the patients would be disastrous.

Dr. Glaister knew of no case of infection in Tubercular meningitis. Certain families die of Phthisis, but these have a history of Phthisis. He then referred to the long incubation period, and to the infectivity of

of Atkinis. He considers notification of no use.

Drs. D. Lindal & Ferguson also made a few remarks, after which Dr. Wilson proposed the adjournment of the discussion to a special meeting to be called for next Thursday. This being seconded by Dr. Forest Orr, was agreed to by the meeting, and the discussion was adjourned till that time.

William Watson M.B. Cell. 18 Pollok St., was then proposed as a new member of the Society by Drs. Hugh Kelly and Robertson, and the meeting was adjourned.

Alexander Miller



Meeting. X.  
Special Meeting.

11 Bridge St., Glasgow

11<sup>th</sup> February 1892.

Met the Glasgow Southern Medical Society,  
the President in the chair.

Present, Drs. Miller, John Brown, D. T. Dalrymple,  
J. R. Wilson, A. S. Tindal, Jenkins, Russell,  
J. V. Wallace, Ferguson, J. G. Andrew + Dr. Duncan.

The business was the adjourned Discussion on  
Dr. Duncan's paper on "The means by which the  
Tubercular Disease is spread, and what may be  
done to prevent its dissemination".

Dr. Duncan first gave a résumé of his paper,  
and then the President called on Dr. J. R. Wilson.  
The honor of the adjournment to recommence the  
discussion.

Dr. Wilson then re-opened the discussion, and he  
was followed by Dr. John Brown, who corroborated what  
Dr. Wilson had said. In recent times "heredity" had  
undergone a change, owing to the discovery of the Bacillus  
Tuberculosis. If heredity were present at all, it was only  
in the form of a susceptibility to tuberculosis. He  
spoke of inhalations and meat as being causes of  
Phthisis pulmonalis, and said it would be very  
difficult to prove heredity, as one would have to  
exclude every other cause. All causes might  
be at work. He thought the subject of heredity

required revision. Dr. Duncan left out the question of Charity in speaking of Hospitals. In cases of great poverty Hospitals for Consumption would be useful.

Dr. Russell expected more information on the leading article. He firmly believes in heredity as a general principle. In cases of heredity, he thought marriage had something to do with the starting of the disease, and he quoted cases where to his knowledge in people with hereditary predisposition; tubercular disease did not manifest itself till after marriage. He then spoke of the disease in animals, and advocated the appointment of good inspectors at decent salaries. He thought the surface water from the manure of cattle suffering from pleuro-pneumonia, contaminating a water supply would set up tubercular disease among the consumers of that supply.

Dr. Ferguson wished to ask Dr. Duncan if the stringent measures of meat inspection &c. adopted on the Continent had caused any decrease in the prevalence of tuberculosis.

Dr. Miller thought we were indebted to Dr. Duncan for bringing this subject before us - a subject of value to the whole nation. Dr. Duncan had opened the discussion in a very able manner. There could be no doubt as to the infectiousness of pulmonary tuberculosis. Dr. Miller quoted one case where phthisis pulmonalis was



probably transmitted from wife to husband. The period of incubation he said was indefinite, but much longer probably than that of the Specific Factors. To prevent the spread of Tuberculosis he advised better hygiene.

Dr. Duncan had listened with pleasure to the remarks of the various speakers. With regard to Dr. Murdo's remarks, he thinks with him that Slaughter-houses shall be under the inspection of the local authority. Dr. McVail seemed to think that he had seen infection between husband and wife in the form of acute phthisis pulmonalis. It was curious that each speaker could only speak of one such case. He then spoke of the incubation period of tuberculosis. In animals when the sputum is sprayed into their eyes, the period is generally about 6 weeks. In this time there is generally well marked infection. Of course this is not in human beings, and there may be a difference of the period in these cases. Some human beings with gangrene of the extremities were tried, and tuberculosis was seen in the lungs 6 weeks after. The disease is caused by the bacillus. Dr. Duncan is strongly convinced that where the health is broken down and where the hygienic surrounding is bad, persons become infected. The tubercle bacillus is not infectious to the tissues of persons in good condition.

He quoted statistics of prisons and showed that the percentage of deaths from tuberculosis increased as the years of residence went on. In answer to Dr. Ferguson, he said there was not enough time yet to give a definite answer. Two or three generations will be required to improve the condition of the people in the Confinement. In Brompton Hospital, London, the percentage of deaths from tubercular disease was not greater than outside.

In Victoria Park Hospital, no assistants or nurses had taken phthisis pulmonalis, and this was probably due to the good hygienic surroundings, as compared with those of the nurses in Germany.

Summing up, he said that every case was got from infection. In the public interest we must leave the question of Confinement in hospital alone, as no community would agree to this. As regards hospitals for dying cases, he did not object to that.

Looking to what authorities can do, "It is Quixote" he says, "to think hospitals would do any good in preventing the spread of Tuberculosis." We should aim at destroying the Sputa. As regards hospitalization, he is in favour of every case being notified for Scientific purposes, but he is afraid it would spread alarmist views among the public. He would try to prevent the spread of diseased milk and meat, and also sputa. Where a patient dies of tubercular



disease, the house should be disinfected. He would insist on thorough ventilation of such sick rooms, and make the nurse take open air exercise. With regard to byres, the local authority should determine the Cubic Space. It should be double the present amount in all, and no byres should be allowed in cities.

Dr. Duncan then said "That a Committee be appointed to obtain from the members of the Society, facts from their own experience, with regard to the directly infectious, or non-infectious character of tubercular diseases, the Committee to consist of the President, the Secretary, Drs. Glaister and Duncan.

This was agreed to by the meeting, and the business closed.

Alexander Miller

Meeting XL.

11 Bridge St

Glasgow 18<sup>th</sup> Feby. 1892.

Met the Glasgow Southern Medical Society, the president in the chair.

Present, Drs. Miller, Couper, Hugh Kelly, Mc-Murray, Halliday, Russell, McHoul, David Lindal, Leake, A.S. Lindal and Robertson, Members; and Drs Murdoch Cameron & William Watson, Visitors.

The Minutes of the Meeting held on the 4<sup>th</sup>, and of the Special Meeting held on the 11<sup>th</sup> of February, were read and approved of. After which William Watson M.B. ChM. 38 Pollok St. was elected an ordinary member of the Society.

The Chairman then asked Dr. Murdoch Cameron to introduce a "Discussion on Caesarian Section, and to describe his method of operating".

Dr. Cameron began by saying that writers dealing with Caesarian Section only repeat the words of other writers, and retain their opinions. He had for years been looking forward to reform in the old practice of first letting the mother die, and then performing Caesarian Section. His first case was a woman 4 feet in height with a deformed pelvis, and in which the operation had been quite successful. His cases have all been Rachitic Women.

He sketched the history of the operation, & compared



the old methods with his own.

He considers Caesarian Section indicated in a pelvis measuring from  $9\frac{1}{2}$  inches downwards, and if it measured 3 inches, he would induce premature labour at the 7<sup>th</sup> or 8<sup>th</sup> month. The presence of tumours may also indicate a necessity for Caesarian Section.

In contrasting Caesarian Section with Embryotomy, he says that all cases for Caesarian Section should be sent to a hospital in a large town for operation, and that in the light of his success with the operation the physician has no right to kill the child at all.

He then described minutely all the details of the operation as performed by himself. The proper time is just before the membranes rupture. He first empties the bowels and bladder, cleanses the abdomen and shaves the pubis. The incision is usually made at the Umbilicus, but above it in a pendulous abdomen. He cuts down to the membranes, and then makes a button-hole incision in the uterus.

If haemorrhage ensues, he controls it by pressing a pessary round the incision. With upward and downward cuts, he then opens the uterus, and extracts the child and the placenta with his hands.

He uses 7 or 8 deep stitches to the uterus, and allows the lochia to drain by the vagina.

The Contraction of the Uterus is assisted by kneading with a warm sponge, and his next step is to tie the Fallopian Tubes. He then stitches the Abdominal wall, dresses the wound, and for 5 days it is not again looked at.

In concluding the paper he invited all the Members of the Society who were desirous of seeing the operation to be present at the Maternity Hospital when he next performed it.

Drs. Miller, D. Findal, Leach, A.S. Findal, Russell, Cooper and Robertson took part in the discussion following, and in reply to their remarks, Dr. Cameron said that Caesarian Section is safer than Craniotomy. That before the operation the bladder should be empty, that the sponge used is hot, but well wrung out, and that he has not as yet used a douche, but that if the discharge was fetid, he might do so with care.

For 30 to 45 minutes is the time he has occupied in the operation. He has no faith in Ergot, and in all cases of Rigid Os he gives 2 grains of Opium.

The Consent of the patient to the operation is always obtained, but if the patients were wealthy he would not tie the Fallopian tubes.

The President proposed a Vote of thanks to Dr. Cameron for his address, and this concluded the business.

Alexander Miller



Meeting. XII

11 Bridge St.

Glasgow 3<sup>rd</sup> March 1892.

Met the Glasgow Southern Medical Society, the President in the Chair.

Present, Drs. Ramsay, D. Fildae, Dr. Murray, Murdoch, Couper, J. W. Wallace, Walter White, Hamilton, Dr. Forbes, Grant Andrew, J. S. Rankin, A. S. Fildae, Davidson, Brown, Duncan, Wilson Cameron, Miller, Robertson & Rutherford, members, & Dr. Wm. West, visitor.

The minutes of last meeting were read and approved of.

Dr. Ramsay was then called on to read his paper on "The Ophthalmoscope in practical medicine", with lantern demonstration.

Dr. Ramsay began by saying that before the introduction of the Ophthalmoscope, the methods of examining the eye were very imperfect, but that now being able by its means to see the parts therein, the diseases were grouped under natural heads, such as Diseases of the Optic Nerve, of the Retina, Choroid &c.

He then referred to the information regarding intra-cranial diseases to be derived from observation of the eye, instancing the fact that as the Optic Nerve is a prolongation of a vesicle of the brain, meningitis must affect that nerve, and also that changes in the Vascularity of the Brain are reflected in the Vascularity of the

of the Optic Nerve.

He then described the appearances of Optic Neuritis, and stated that four-fifths of the Cases of Double Neuritis are due to Tumour of the Brain, so that if the neuritis is double it is usually cranial, but if monocular, intra-orbital. If the neuritis increase greatly an increase in the size of the tumour may be argued, and if a tumour has been diagnosed as present, and optic neuritis is a late symptom, it generally foretells the near approach of death.

In Optic neuritis the vision may be unaffected. It may be a transient affection, and in Syphilitic cases it may pass off altogether without damaging the sight, but usually cicatricial contraction follows and atrophy of the Optic nerve.

Dr. Ramsay next referred to Cases of Spinal disease and showed that eye phenomena are often coincident with lesions in the nervous system generally. In Locomotor Ataxy the Optic symptoms show, a long time before the others.

He then spoke of Disease of the Heart and Circulatory system in connection with Haemorrhagic Retinitis, of white spots in the macular region of the fundus in connection with Retinitis in Renal disease, of Wernicke's Blindness and Albuminuric Retinitis.

He next referred to Syphilis. He stated that Syphilis



may affect all the structures of the eye, and that it usually attacks the nervous structures late, say 16 years after the infection. He spoke of Syphilitic Retinitis and Choroiditis, and concluded his paper by urging the systematic use of the Ophthalmoscope in obscure nervous conditions.

The lecture was beautifully illustrated by lantern slides exhibited on two screens, enabling different sections of the same disease to be seen at one time and compared with each other.

The pictures were mostly from drawings of actual cases by Dr. Ramsay himself, and were admirably adapted to illustrate his remarks.

Drs. Miller, Duncan and others afterwards spoke, complimenting the lecturer for his most interesting paper, and this was all the business.

Alexander Miller

Meeting XIII

11 Bridge St  
Glasgow 17<sup>th</sup> March 1892.

Met the Glasgow Southern Medical Society,  
The President in the Chair.

Present, Drs. Miller, A. S. Tindal, John Brown,  
J. Walker Downie, J. S. Rankin and Robertson.

The minutes of last meeting were read and  
approved of.

Adjournment:

Proposed.

After which, on account of the small attendance  
Dr. Miller moved that the meeting be adjourned  
till the 31<sup>st</sup> March.

This was seconded by Dr. A. S. Tindal and  
agreed to by the meeting.

The meeting was therefore adjourned.

Alexander Miller



Meeting XIV

11 Bridge St

Glasgow 31<sup>st</sup> March 1892.

Met the Glasgow Southern Medical Society.

Absence of Dr. Miller. The Secretary intimated an apology for absence from Dr. Miller, President, and in the absence of the Vice-President also, he proposed that the Treasurer Dr. John Brown be asked to occupy the Chair. This was agreed to.

Chairman. There were present Drs. Brown, Walker Downie, Wilson, Workman, Fraser Dorr, Ferguson, Hamilton, A.S. Findlay, Wilson Cameron, Cooper, Parry and Robertson.

Minutes approved. The Minutes of last meeting were read and approved of.

Dr. Downie's paper. After which, Dr. Walker Downie gave details of three cases in which he performed Laryngotomy, and showed instruments connected with the operation, and coloured drawings of each of the cases.

Two of the operations were performed for the removal of growths, and the third for the relief of Laryngeal Stenosis.

First Case. The first case was that of a man aged 53, with a fibroma occupying the lumen of the larynx, growing from the Right Vocal Chord, causing great dyspnoea and a very foul and offensive breath.

The Thyroid and Cricoid Cartilages were divided



and the tumor removed, and when the parts were stitched up again, the man was able to speak with a fairly strong voice, but a few days afterwards he contracted Double Pneumonia and died.

Second Case. The Second Case was that of a boy of 10 who was at the meeting, and was examined by the members present. He suffered from multiple papillomata of the Larynx. Some of the growths were removed by a snare, and the galvano. cautery, but it was afterwards found necessary to split the Thyroid Cartilage and remove other growths from the wall of the Larynx.

There is now a fresh growth which has arisen from the Epiglottis and is extending towards the Vocal Chords.

Third Case. The Third case was a joiner, complaining of Luskiness of 12 months' duration, and of difficulty in breathing, but with no pain in deglutition.

The fauces and larynx were granular. Both Vocal chords were ulcerated, and the right chord was nearly absent. It was a case of late manifestation of Inherited Syphilis.

The ulcers healed under syphilitic treatment, but the granulations and the Cicatrization following the healing process necessitated the performance of Tracheotomy and Thyrotomy.



After the discussion on the paper, Dr. Downie remarked that Thyrotomy is to be performed only in the presence of danger from suffocation, and that Sponges if smartly used, totally prevent blood entering the Trachea during the operation.

Dr. Workman's  
paper.

Dr. Workman then read a short paper describing (1) a Case of Disease of the Pancreas, and (2) a Case of Acute Schirrus of the Stomach.

In the first instance he showed microscopic sections of the pancreatic tissue. The pancreas was large and full of infarctions, and the liver tissue had fatty infiltration.

The main point to which attention was called, was the presence in the pancreas of white patches of fungus-like growths permeating the whole tissue.

Of 400 post-mortem examinations which he had conducted in the Royal Infirmary, this was the only case of Disease of the pancreas which he had seen among them.

The Second Case was described by Dr. Workman as an illustration of the rapid growth of Cancer at the pyloric end of the Stomach, the inconvenience to the patient being only of 4 weeks' duration.

The whole liver was seen to be of great size

with umbilicated nodules covering its surface.

In the remarks following the reading of the paper, Drs. Cooper, Wilson and Brown took part, and Dr. Workman briefly replied.

This was all the business.

John Brown



Meeting XV.

Victoria Infirmary  
Lucan Park, Glasgow  
14<sup>th</sup> April. 1892.

Place of  
meeting.

Severant

By the Courtesy of the Directors of the above  
Infirmary the Glasgow Southern Medical Society  
met here. Dr. Miller President, in the Chair.  
Present, Drs. Miller, Duncan, Napier, Leask,  
Andrew Wilson, Grant Andrew, McHale, A.S. Tindal,  
Macintosh, Jenkins, Cameron, Brown, Parry,  
Frazer Orr, Hamilton, D. Tindal, Stewart,  
Couper, Turnbull Smith, McEwenray, and Robertson,  
members, and Dr. P. Adams, visitor.

Minutes

approved

After Tea & Coffee kindly provided by the  
Infirmary authorities, the members adjourned to  
the Boardroom, where the Minutes of last meeting  
of the Society were read and approved of.

A letter of apology for the absence from the  
meeting of Professor Fairbairn was read and approved  
of.

Dr. Duncan

present.

Dr. Duncan then read a paper describing shortly  
the following cases presently under treatment here.

Case of Ague

1<sup>st</sup>, A case of Ague of 12 weeks duration, with  
Haematemesis, Melena and great Anaemia, who  
recovered under treatment of 10 grain doses of Quinine.

Case of  
pleurisy

2<sup>nd</sup>, Two cases of pleurisy. One in which  
Paracentesis was performed, and 28 oz. of fluid

withdrawn, and another in which the fluid was absorbed without tapping.

Case of  
Phthisis.

3<sup>rd</sup> A Case of Phthisis, with a cavity in the apex of the right lung. This woman's Sputum was swarming with Tubercles, but her breath was free from them. This had been proved by careful experimental examination, and Dr. Duncan remarked that it is difficult to turn tubercles into dust particles, and he did not consider there was danger in breathing the breath of Tubercular patients.

Cardiac  
Case

4<sup>th</sup> A Cardiac Case, where in a girl who had Rheumatic Fever 12 years ago, there was now developed an Auricular Syssolic Murmur along with a V. S.

Dr. Napier's  
paper.

Dr. Napier then showed the following patients and described their symptoms, and the treatment they had undergone under his care.

Two Cases of  
Lupus.

1<sup>st</sup> Two Cases of Lupus, which had been apparently cured by "Koch's treatment", but which had relapsed and had afterwards been treated by scraping, with very satisfactory results.

Cases of  
Pneumonia

2<sup>nd</sup> Three Cases of Pneumonia, one with no cough and no expectoration, another with all the usual characteristics of Pneumonia, but with a normal temperature all through; and a third complicated with pericarditis, and where



great Cyanosis had disappeared within 12 hours from the administration subcutaneously of 3 minims of liquid Strychniae every 6 hours.

Case of

Pneumo-thorax

3<sup>rd</sup>. A Case of Pneumo-thorax in a man injured by piping falling on him, but where the cause of the Pneumo-thorax was not quite clear.

Case of

Phthisis

4<sup>th</sup>. The last case shown by Dr. Napier was that of a young man who came to the Hospital with symptoms of Phthisis.

A large screw key had fallen on his head 6 years before, and he had lately developed paralysis on the left side, and tenderness over the Scap which was also on the left side.

The treatment consisted of blisters, with the administration of the Bromide and Iodide of Potassium.

Dr. Napier suggested that the lung ailment might be trophically connected with a deficient nerve supply owing to the injury to the head.

There were no bacilli found in his sputum.

Microscopical  
Slides.

At the Conclusion of Dr. Napier's paper, Microscopic slides of Phthisical Sputa were displayed by the House-surgeons of the Infirmary, and the members afterwards accompanied Dr. Duncan to his wards, where the Cases referred to in his

papers, were seen and examined.  
This was all the business.

Alexander Miller



Meeting XVI.

11 Bridge St.

Glasgow, 27<sup>th</sup> April 1892.

Met the Glasgow Southern Medical Society  
the President in the Chair.

Present: Drs. Miller, John Brown, D. Laidlaw,  
J.G. Wilson, Dougall, Jenkins, Russell, Hamilton,  
Jos. Glaister, McMurray, Black, Cooper & Robertson.

The Minutes of last meeting were read  
and approved.

After which, the President seconded by Dr.  
Cooper, moved that "The Secretary be instructed  
to express through Dr. Macintosh the thanks  
of the Society to Drs. Duncan and Napier, and  
to the Authorities of the Victoria Infirmary for the  
interest and kindness displayed towards the  
members of the Society at their meeting in  
the Infirmary on the 14<sup>th</sup> inst. This was agreed to.

The question of granting the Diploma of the  
Society to Dr. Ferguson of Pollokshields, who  
is about to leave Glasgow for the North-West  
of America, was then discussed.

Dr. J.G. Wilson proposed that the Diploma  
should be granted. This was seconded by  
Dr. Dougall and agreed to, Drs. Dougall, Wilson  
and Miller being appointed a Committee to get  
the diploma drawn up, signed and forwarded.

Secretary.

Approval of  
Minutes.

Thanks to the  
Victoria Infirmary  
Doctors.

Diploma to  
Dr. Ferguson.

to Dr. Ferguson.

The president next intimated that the meeting of the Society on the 27<sup>th</sup> of July would be devoted to the exhibition of pathological and other specimens, and that members who intend to show specimens should intimate the same to the Secretary previous to that meeting.

Dr. Cooper's  
paper.

Dr. Cooper showed a patient suffering from Universal Alopecia, and was then called upon to read his paper on "Recent Views on Eczema".

Eczema.  
He introduced the subject by asking the question "What is Eczema?"

He showed that the field covered by the term has varied very largely in its extent, & that the definition now most generally accepted by the profession, is that which includes Superficial Vesiculation, pustulation or Scaling, unless in cases which are marked off from the group by very special characteristics.

He then discussed the definition of Hilton Fagge that Eczema is "an idiopathic, common superficial dermatitis, showing at some period or other of its course, the phenomena of Exudation".

He showed that both in Britain and America and in France, dissatisfaction exists as to the



loose way in which the term Eczema is used, and he maintained that if its boundaries were more rigidly delimited its treatment would become more scientific, and consequently more successful.

He next referred to Hardy's definition of Eczema and its review by the French physician Dr. Brocq, and then compared the inflammation produced by the application of an irritant to the skin with real Eczema, and spoke of their pathological connection.

He gave the view of the French dermatologists who hold that Eczema is an expression of a constitutional peculiarity, and noted causes considered by them as predisposing, such as Scrofula and Heredity.

Dr. Brocq's  
Cases.

He quoted cases from an article by Dr. Brocq, on Accidents following suppression of Eczematous eruptions, and after criticising the opinion of the French school, he referred first to the Viennese teaching and afterwards to the teaching at Hamburg.

Treatment  
at Hamburg.

At the latter place local methods of treatment are adopted, the idea of Dr. Kuna that the disease is wholly due to the action of several parasites, being the principle which dominates

the treatment here.

At the conclusion of the paper Dr. Miller left the meeting, and Dr. Cooper took the chair.

Discussion.

A short discussion on the paper followed in which Drs. McMuray, Russell, Wilson, Hamilton and others took part, and Dr. Cooper afterwards replied.

Notice of  
proposal.

During the meeting, Dr. Dayall gave notice of proposal, seconded by Dr. Wilson that Dr. Peter Ferguson M.D. Cell. be appointed a corresponding member of the Society.

This was all the business. —

Alexander Miller



Meeting xvij.

11 Bridge St.

Glasgow, 12<sup>th</sup> May 1892.

Met the Glasgow Southern Medical Society  
the president in the chair.

Present:

Drs. Miller, Erskine, Cooper, McMurray,  
Carr, Brown, Turnbull Smith, A. Rankin, Hamilton,  
Ken Love, Russell, D. Tindal and Robertson.

Minutes ap-  
proved.

The minutes of last meeting were read and  
approved of.

Dr. Erskine's  
paper.

Dr. Erskine then introduced a "Discussion on  
Medical Charities from a Socialistic point of  
view."

Medical Charities  
in Glasgow.

He said the title of his remarks originated  
in a letter of Dr. McPherson to the "Herald" some  
time ago. He began by saying that many  
medical charities had lately come into exis-  
tence in Glasgow. He pointed out that the  
medical charities have are not properly distributed  
as each stands on its own legs without regard to  
the interests of one another, and he quoted Mr  
McEwan in saying that there are not enough of  
medical officers in existence.

He then answered the question "Who brings  
new charities into existence?" by stating that large  
firms believe in infirmaries as a matter of profit  
to themselves, and showed that almost the same

men are directors of all the medical charities in Glasgow.

Every man for himself  
He blamed medical men for bowing to Baal in the persons of the rich, and said that in medical appointments, it is "every man for himself and the Devil take the hindmost".

Socialism  
He went on to state that Socialism is progressing with great strides - and defined Socialism as "a common holding of means of welfare for the benefit of every member of the Community".

He read a long list of examples of the progress of Socialism, and instanced Glasgow as a model of Socialism in its government.

He showed that Capitalists are being superseded by the State and by limited companies, and cannot now take advantage of their position.

Alteration of  
Poor Law.  
He said that the Income Tax had done much good, and that the Poor Law should be altered to let everybody be treated in Hospitals at the expense of the Rates.

He drew attention to the fact that our hospitals are neither registered nor inspected.

Special Hospitals.  
He explained the method of starting Special Hospitals and farcically compared their Annual Meetings to School examinations of 20 years ago, and concluded



his remarks by saying that the number of Country Hospitals should be increased.

Dr. Miller's remarks. Dr. Miller then remarked that they had listened with pleasure to Dr. Evskine's dissertation, and called on the members to add to the discussion.

Dr. Robertson. Dr. Robertson would have preferred to hear a discussion on Medical Charities themselves rather than on the wide subject of Socialism. He condemned the Income Tax, and said it caused more lies to be written than any other law that had ever been passed. He would like to see the Charities so conducted that only those who were in need of charity should partake of their benefits.

Dr. Carr. Dr. Carr thought that those in practice 20 or 30 years ago were worse off than those now, and referred to Dr. C. Blackie's articles published in '72 & '73. He referred to the Special Hospitals speaking of their origin being as a rule through one man and for his own benefit, though it may be followed up by the appointment of a directorate. He then referred to the fact that now some of the large employers of labour are sending all their employees who receive injury to the Infirmary to which they subscribe.

Dr. Hamilton. Dr. Hamilton expected to have heard something new from Dr. Evskine. He thought there were abuses



in the present system. He objected to the system of taxation proposed by Dr. Evskine as that would do away with the question of philanthropy.

Dr. Mc Murray

Dr. Mc Murray thought that in appointments to General Hospitals, these ought to be open to new men, and that the Special Hospitals should be open to General Medical Practitioners.

Dr. Brown.

Dr. Brown spoke about the inspection of the Hospitals, and was against Government inspection. He thought that on the whole the General Infirmeries were well managed, though no doubt there existed not a few cases of abuse. He also spoke against the imposition of taxation.

Dr. Love

Dr. Love thought Dr. E. would have focussed the subject to a few points. He thought we should take a higher moral tone than had been put before us, and that the medical profession themselves were very much to blame for the condition of affairs that exists at present in regard to the Special Hospitals.

Dr. Russell.

Dr. Russell agreed with Dr. Love and thought the medical profession very much to blame. He spoke against some of the Special Hospitals, and thought that some check ought to be put upon many that now receive advice at both General and Special Hospitals.



Dr. Evershine replied.

That was all the business. —

Alexander Miller

Meeting XVIII

11 Bridge St

Glasgow 26<sup>th</sup> May 1892.

Met the Glasgow Southern Medical Society, the President in the Chair.

Present:-

Dr. Miller, Cooper, Eoskine, Dougall, Lindsay Steven, Brown, Pany, Carr, D. Lindsal, Wilson Cameron, Wood Smith, Hamilton, Downie, Russell, Stark, Black, Wilson, Jenkins, King, Mc Murray, Halliday & Robertson, members, and Dr. J.K. Moore, visitor.

Minutes ap.

proved.

The minutes of last meeting were read and approved of.

Corresponding member

Peter Ferguson M.D. Cell. was then proposed by Dr. Dougall, seconded by Dr. J.G. Wilson, and unanimously appointed by the meeting as a Corresponding member of the Society.

Letter from Dr.

Ferguson's father.

The Secretary read a letter from Dr. Ferguson's father thanking the members for the Diploma of the Society which had been conferred on his son.

Picnic.

The Annual picnic was then brought under discussion and Dr. Eoskine seconded by Dr. Russell moved that the picnic take place as usual.

Dr. Robertson proposed that there be no picnic this year, but as this amendment was not seconded it was agreed that the picnic take place, and



The following gentlemen were appointed to carry out the whole arrangements, viz: Drs. Carr, Erskine, Miller, Cooper, and Robertson. —

The more important part of the business of the meeting was then proceeded with. This consisted of an exhibition of microscopic and other specimens which were laid out for examination, by the members, and were as follow: —

Dr. Lindsay Steven. 1. A Series of Cultures of Pathogenic and Non-pathogenic organisms from the Pasteur Institute, Paris. Shown by Dr. Lindsay Steven who in his remarks explanatory of the specimens gave a short description of the Pasteur Institute and its arrangements, for instruction in Bacteriology.

Dr. John Brown. 2. Four Microscopic Specimens, shown by Dr. John Brown and consisting of: —

a. Secondary Cancer of the rib, Vertebrae, and ovary, occurring after removal of the primary disease in the mamma, and complicated with myoma of the uterus (For description, see "Lancet" May 7<sup>th</sup> 1892.)

b. Uterine myoma removed from patient by Dr. James Kerr Love.

c. Uterine myoma - calcified - found post-mortem in Laboratory of Glasgow Royal Infirmary.

d. Tumor removed from patient by Dr. John Smart-Nairn, Glasgow Samaritan Hospital for Women.

Dr. Dargall. 3. A bottle of *Ascaris Lumbricoides* from a patient - Three tape-worms from Loch Leven Trout - The head of a *Taenia Mediocanellata* - and a sample of Rabbit's Spinal Chord from the Parker Institute - shown by Dr. Dargall.

Dr. Nigel Starke. 4. A Dermoid Tumor of the Nary, shown by Dr. Nigel Starke.

Dr. Eoskine. 5. Temporal bone showing extensive disease from chronic purulent inflammation of the Middle Ear, - and a Bipid Uvula. Shown by Dr. Eoskine.

Dr. A. Brown Kelly. 6. Minute laryngeal growths from 2 Cases and a large collection of polypi removed from the Nasal Cavities of a patient. Shown by Dr A. Brown Kelly.

Dr. Parry. And 7. Five Specimens shown by Dr. Parry, viz: -  
a. Uterus removed by Vaginal Hysterectomy, for malignant Disease.

b. Cystic Tumor removed from Submaxillary region.

c. Tubercular Testicle.

d. Loose body from knee-joint.

e. Specimens & drawing of Tubercular Disease in joints.

The Specimens were described by the Several gentlemen exhibiting them, and after some complimentary remarks on the Exhibition by the President and others the proceedings terminated. -

Alexander Miller



Picnic.

George Hotel

Kilmarnock 16<sup>th</sup> June 1892.

The usual pic-nic of the Society took place today.

Sedentary:

Present: Drs. Miller, Eoskine, A. Johnston, Knox, E. McMillan, Sloan, Black, Carr, McVail, Russell, Hamilton, Hugh Kelly, A.S. Lidal, Marshall and Wright, members, and Dr. Napier, London, visitor.

Left St. Enoch's

The party left St. Enoch's Station at 12.30 p.m. by train to Kilmarnock, where lunch was served in The George Hotel.

Hurlford.

Galston.

Cessnock Castle.

After a short stay the party drove to Loudoun Castle, passing through the villages of Hurlford and Galston. A halt was made at Cessnock Castle, one of the seats of the Duke of Portland, where the members had the privilege, through the kindness of Mr. J. H. Turner, of being conducted by him over the ancient castle, as well as the grounds and garden. Before leaving, the President in name of the Society thanked Mr. Turner for his kindness, in not only granting the privilege of seeing through the Castle, but also in personally conducting the party, and explaining the interesting features.

The party then drove through the village of

Newmilns. Newmilns on to Loudoun Castle, and spent  
Loudoun Castle some time there in examining the various rooms,  
especially the large collection of pictures and  
the library. The journey back to Kilmaronock  
was then commenced, and this place was reached  
at 6 o'clock. The members were indebted to  
Mr. Hendrie, Loudoun Estate Factor, for the  
privilege of seeing through the Castle.

Dinner in Diner was served here in the George Hotel  
George Hotel and in addition to those already mentioned, there  
Kilmaronock were present as guests, Drs. McLeod, Frew, and  
Guests. Rankin, Kilmaronock and Dr. Bewidge, Hurlford.

After dinner which was well served by  
Toasts. Mr. Dickson, the President proposed the usual  
loyal & patriotic toasts, "The Queen & Royal Family".  
The Crampin, Dr. Erskine proposed "The Medical  
Profession of Kilmaronock and neighbourhood, which  
was replied to by Dr. McLeod.

Dr. Carr then proposed "Our Guests" to which  
Drs. Frew and Dr. Napier replied.

Dr. Bewidge thereafter proposed "The Glasgow  
Southern Medical Society", to which the Crampin  
replied.

Dr. Erskine then proposed the President's health  
and Dr. Millar replied.

The rest of the time before the train started



Return.

was occupied with song, after which the  
Company took train on the return journey  
shortly after 8 o'clock, and reached Glasgow  
about 9, having spent a most enjoyable day's  
outing and one of the best pic-nics ever held  
by the Society. —

Alexander Miller

Session 1892-93.

Meeting I.

11 Bridge Street,  
Glasgow. 13<sup>th</sup> October 1892.

Met the Glasgow Southern Medical Society,  
The President in the Chair.

Chairman.

Present :-

Dr<sup>s</sup> Couper, Miller, Brown, Adamiston, John Glaister,  
Duncan, Mr<sup>s</sup> Millan, C.W. Stewart, Jenkins,  
Mr<sup>s</sup> Pherson, Hamilton, Haddow, Turnbull Smith,  
Andrew, Mr<sup>s</sup> Murray, Napier, A. Rankin, Fraser Esq.,  
Joseph Glaister, Couper, A.S. Tindal, Brekina,  
J. M. Service, Richmond, Halliday, R. M. Service,  
J.H. Kelly, Munro, Parry and C.E. Robertson.

Minutes of  
26<sup>th</sup> May & 14<sup>th</sup> June.

The minutes of meetings held on 26<sup>th</sup> May and  
14<sup>th</sup> June last were read and approved of.

Sir Geo. H. B. Macleod.  
Dr Gordon.

The president then made reference to the death of  
the late Sir George H. B. Macleod, and also to the  
sudden death of Dr Gordon, another member  
of the Society. On the suggestion of Dr<sup>s</sup> Duncan  
and Mr<sup>s</sup> Millan it was agreed that the President  
Secretary and Dr<sup>s</sup> Duncan should form a committee  
to draw up a memorial to be sent to the relatives  
of Sir Geo. Macleod, and that Dr<sup>s</sup> C.W. Stewart be  
added to the committee to draw up a memorial  
to send to the friends of the late Dr Gordon.



Meeting (Contd) The Treasurer's statement for the past session was then read and explained by Dr Brown, who stated that financially the Society had never before been in such a prosperous condition, there being a balance in favour of the Society of £61.15/- and only £2.10/- of arrears.

Treasurer's  
Statements.

Adoption of  
Statement.

Dr Glaister, while thanking the Treasurer for his services in producing such a satisfactory balance, moved the adoption of the report. This was seconded by Dr Couper and carried by acclamation.

Election of  
Office-Bearers.

The meeting then proceeded to elect Office-bearers for the ensuing session, with the following result:-

President — Dr David Couper.

Vice-President — Dr Jas. K. Kelly.

Treasurer — Dr John Brown.

Secretary — Dr A. B. Tindal.

Editorial-Secretary — C.E. Robertson M.B.,

Seal-Keeper — James Erskine M.A. M.B.

Court Medical :- Alex. Miller L.R.C.P.E. Convenor,

ex Officio, and Dr Duncan, Napier, John Glaister & C.W. Stewart

For the office of Governor of the Victoria Infirmary.

Dr Glaister proposed that Dr McWilliam be re-elected to the position of Governor. This was seconded by Dr Duncan, and supported by Dr Napier. A letter from Dr Maynard in support of —

Meeting (contd.)

Discussion as to  
meaning of Law ix.

Notice of Motion  
by Dr. Eben. Duncan

Dinner Committee

Proposed  
New Members

of Dr. In: Millan's re-election was also read by the Secretary. After which Dr. Robertson proposed that Dr. Miller, the retiring President be elected to the office, and this was seconded by Dr. Edmiston. On a vote being taken, Dr. In: Millan was declared elected for

another year. Some discussion, originated by Dr. Hamilton and carried on by Dr. Glaister and others, then took place regarding the meaning and terms of Law ix of the Society, and after Dr. T.W. Jenkins had been elected

as extra-councillor, Dr. Duncan gave notice of motion of amendment of Law ix of the Society to the effect that the words in that Law within the brackets "One of them shall retire annually in order of seniority" be expunged.

This was seconded by Dr. John Glaister.

A committee to take charge of all the arrangements for the Annual Dinner of the Society to be held on the 27<sup>th</sup> October was then appointed, consisting of President, Treasurer, Secretary & Dr. Irvine.

The following new members were then proposed as follows:- William Buchanan M.B., & C.M.,

Proposed by Dr. A. Munro, seconded by Dr. W. Chalmers  
address:- 442 Gallowgate



Thomas Forrest M.B., & Cur.,

45 Abbotsford Place.

Proposed by Dr. A. S. Tindal. Seconded by Dr. Jenkins.

E. B. Gibson M.D.,

Victoria Infirmary, Glasgow.

Proposed by Dr. J. Millan. Seconded by Dr. Duncan.

Thos. K. Innes M.A. M.B. Cur., F.R.P.S.G.

10 Clairmont Gardens.

William J. Millan M.B., and C.M.,

Rannochlea, Pollokshields W.

David J. Croie L.F.P. & S. G.

45 Abbotsford Place.

Proposed by Dr. Brown. Seconded by Dr. Miller.

J. Stewart Campbell M.B., and Cur.,

12 Carrington Street.

J. C. A. Smith M.B., and Cur.,

204 Paisley Road. West.

Proposed by Dr. R. T. Halliday. Seconded by Dr. Robertson.

This concluded the business.

~~Daniel J. Nicol M.B., and Cur.,~~

~~Parkhead Cross, Glasgow~~

~~Proposed by Dr. Innes, Seconded by Dr. Wm. Chalmers.~~

~~John Gray M.D. L.D., F.R.S. The University, Glasgow~~

David Souper  
Pres.

## Meeting II.

14 Brough Street  
Glasgow

### Annual Dinner.

The annual Dinner was arranged for the evening of the 27<sup>th</sup> October, but was postponed owing to a conversation given by the Lord Provost, Sir John Muir Bart. occurring on the same date.

The dinner took place in the North British Station Hotel on the evening of 3<sup>rd</sup> November 1892.

### Present:-

Dr Couper, President, in the Chair, Dr John Brown, Groupiers, W. T. Gairdner, Mr Call Anderson, Mr. Black, J. Macintyre, Mr. G. Cluckie, Dr. Smith, John Glister, John Stewart, R. Pollok, Alex. Miller, Ed. Mr. Millan, James Briskine, Sam. Sloan, W<sup>m</sup> Chalmer, Nigel Starks, H. E. Clark, Robt. Fullarton, Alex. Munro, Thos. Lapraik, T. K. Dalglish, C. E. Robertson, J. Walker Downie, E. H. L. Giffant members, and Dr Buchanan and Mr Nicol, Glasgow, and Donald Paisley

### Loyal and Patriotic Toasts by the President.

guests. After an excellent dinner, the President gave the usual loyal and patriotic toasts, and these were heartily responded to with a musical accompaniment.

### Reply Dr Macintyre and Pollok.

Dr Macintyre and Pollok replied for the Navy and Army. The President then gave the toast of our Society, which was responded to with great enthusiasm.

### Kindred Societies by Dr C. E. Robertson.

Dr C. E. Robertson proposed the kindred Societies.

Dr Mr Call Anderson replied for the Pathological and Clinical Society, and said he felt aggrieved at not having been notified to the effect that he was



was to respond to this toast. After a good dinner, a glass of wine and a cigar, he felt as if he could be eloquent on the subject of the "Ladies" or even of the "Youngest member," but to reply to the toast of kindred societies had no fascination for him. He strongly advocated a union of the Medical Societies on the North side of the river into an Academy of Medicine. He always had great pleasure in being present at the meetings of the G.S.M.S. and took especial notice of the social element, which was a marked feature in our Society as compared with other Societies.

Dr. Lapraik replied for the Medico-Chirurgical and said that the youngest Society, "The Obstetrical and Gynaecological" could be advantageously amalgamated with the section of Midwifery in the Medico-Chirurgical.

Dr. Miller replied for the Obstetrical and Gynaecological and gave an encouraging account of the flourishing state of the membership and finances of the Society.

Dr. Erskine proposed the toast of "The University and Medical Schools," and in the course of an admirable speech gave reminiscences of the classes he had attended in the Arts and Medical Faculties making special references to the lectures of Prof.<sup>s</sup> Rushington, Lord Kelvin, Allen Thomson and Cowan. These were the men, he said, who contributed largely to the

Meeting # (cont'd.) The making of our University. He hoped that in a few years all the Colleges in Glasgow would be united in one great University, and advocated that wherever sufficient clinical material and properly qualified teachers could be found, these should be recognized by the University.

Reply by  
Dr. W. T. Gairdner. Dr. W. T. Gairdner, in replying, said he thought Dr. Erskine's aspirations were noble and excellent, but he did not think Glasgow University could spread her wings so broadly as Dr. Erskine advocated. He was quite prepared for a large extension, as he had no fear for the future of the University. The Glasgow University was set up as a target for people to shoot at, but the future would show how the University would maintain its own. All the men referred to were his associates, and he referred feelingly to Sir George H. B. Macleod as an excellent teacher and colleague. In conclusion, he wished all teachers in all the Colleges every success.

Reply by  
Dr. Dalziel & Clark. Dr. T. K. Dalziel replied for Anderson's College, and Mr. H. E. Clark for St. Mungo's College. At this stage, Dr. H. E. Millan was called on by the President to speak, and Dr. H. E. Millan intimated to the Society by Dr. H. E. Millan that he had been successful in finding the Seal of the Society. He then presented the Society with a beautiful case, which he had



Meeting II (cont'd.) had got made for the purpose. The case was made of wood from the old University of Glasgow, and has a plate on the lid with an inscription. The case is beautifully finished, and is fitted into a tin box. Dr. In: Millan presented duplicate keys along with the boxes. He promised, at an early date, to give a short account of the Seal of the Society.

President & Dr. Erskine The President and Dr. Erskine replied in name reply in name of S.S.Ms. of the Society, thanking Dr. In: Millan for his handsome gift.

Other toasts. The other toasts were:-

"The Youngest Member" by Dr. In: Millan, Replied to by Dr. P. Sloan.

"The Guests" by Dr. G. E. Robertson. Replied to by Dr. Donald.

Dr. W. T. Gairdner proposed the health of Dr. Couper the President. This toast was drunk with great enthusiasm, the members afterwards singing for he's a jolly good fellow. Dr. Erskine and Glaister enlivened the dinner with songs.

List of proposed new members. The following gentlemen were proposed for Ordinary Membership:-

Daniel In: Nicol In. B., and Cm., Parkhead Cross, Glasgow.

Proposed by Dr. Munro, Seconded by Dr. W. M. Chalmers.

John Gray In: Hendrick In. D., LL.D., F.R.S. The University, Glasgow.

Proposed by Dr. Couper, Seconded by Dr. A. S. Tindal.

John C. Horie In. A., In. B., Civ., L. In. 4 Bruce Road, Colloakshield W.

Proposed by Dr. John Brown, Seconded by Dr. A. S. Tindal.

Meeting II (contd.)

The following is a copy of the letter sent to Lady Inglewood, which the Secretary was instructed to engross in the minutes.

Minute of  
Sir George Inglewood's  
death.

The Glasgow Southern Medical Society at this its first meeting of a new session, desires to place on record the great regret and deep sorrow with which its members received the announcement of the sudden death of Sir George Husband Baird Inglewood.

Sir George was a member of this Society for upwards of twenty years. During that time, he frequently attended our meetings, and enriched our proceedings with most valuable papers of great surgical importance. His papers were always full of original observations, and practical instruction, and were highly appreciated by our members. A year ago, he found it necessary owing to pressure of other engagements to resign his membership of our Society. In recognition of his eminent position as a distinguished teacher in our University, and as a scientific surgeon, last session we unanimously elected him an Honorary Member, and we hoped he would long be spared to enjoy the many honours and distinctions, which he had so well earned.

We now desire to express our deep sympathy with Lady Inglewood, and the other members of his sorrowing family in the great and irreparable loss which they have sustained.



Meeting II (Contd.)

Copy of letter received from the Rev. W. H. Macleod M.A., B.D.,  
Buchanan Manse,  
Drymen. H. B.,  
October 31<sup>st</sup> 1892.

Dear Sir,

Reply from  
Lady Macleod  
per the Rev.  
W. H. Macleod M.A., B.D.

I have been asked by my mother,  
Lady M<sup>rs</sup> Leod to convey to you, and through you to  
the members of the Glasgow Southern Medical Society  
her deep appreciation of the resolution passed by  
them at the first meeting of the Society. And  
she desires you to convey to them her very warm  
thanks for the expression of their sympathy towards  
her in the great loss, which she has sustained through  
the death of my father, Sir George Macleod.

Believe me, Dear Sir,

Sincerely yours,

William H. Macleod.

To A. Stewart Tindal Esq. M.D.,  
Sec. Glasgow South. Med. Soc.

Minute of the death  
of Dr W<sup>m</sup> Gordon  
The following is the Society's minute of the death of  
William Gordon M.B., and B.S., (Glas.)  
Another of the somewhat sudden and frequent losses re-  
cently sustained by the Glasgow Southern Medical Society falls to  
be noticed in the death of Dr William Gordon of Paisley Road;  
and the members of the Society desire to place on record

Meeting II (Contd.) record their appreciation of his worth as a man, and  
as a member of the Society; and to express to his  
relatives their sympathy with them in the loss they  
have sustained.

Graduating at Glasgow University ten years ago,  
he in 1884 succeeded the late Dr John Hiven in  
Paisley Road. The zeal and attention to duty, which  
had characterized his college career, followed him  
in after life, and he thus soon secured a considerable  
local practice.

During the early summer of last year, finding his  
strength unequal to the strain and fatigue of work,  
he resolved to seek renewed health and strength by  
a prolonged holiday. Having spent the months of June,  
July and August on a Mediterranean cruise, he returned  
to Glasgow to all appearances restored to his wonted health.

About September however of this year, his health again  
began to suffer from the extra work induced by a severe  
epidemic of Scarlet Fever in the district, and he was  
once more obliged to retire from the active duties of his  
profession. Entering Miss Mrs Alpine's nursing home for a  
short period of quiet previous to undertaking the journey  
to his native place in Petherlandshire, he expired  
suddenly and unexpectedly on October 4<sup>th</sup>, apparently  
from failure of the heart's action. Dr Gordon was  
a member of this Society since 1884 & was unmarried.



Meeting ii (contd.) He resided along with his sister, and a younger brother, who, during his various illnesses, assisted in carrying on the work of his practice.

Resignation of Dr. T. D. Bertram. A post card from Dr. T. D. Bertram, Brescia, Pollokshields W. was read, intimating his resignation of the membership of the G.S.M.S. owing to his leaving the country.

This was all the business.

David Couper  
Pres.

Meeting <sup>III</sup>.

11<sup>th</sup> Bridge Street,  
Glasgow. 10<sup>th</sup> November 1892.

- Met the Glasgow Southern Medical Society, the President,  
Chairman. Dr. Couper in the Chair. Present Drs. Miller, Halliday,  
Inuro, D. M. Smith, John Stewart, J. K. Kelly, Parry,  
Sederunt. Mr. Millan, Russell (Parkhead), Lapraik, Leask, Robertson,  
John Brown, Erskine, A. S. Tindal Members. Dr. Thomson visitor.
- Minutes of last The minutes of meeting of 13<sup>th</sup> October were read and  
two meetings after slight alteration approved of; and the minutes of  
approved of. the Dinner held on 3<sup>rd</sup> November were read and approved of.  
The reports of the Committees appointed to draw up notices  
of the deaths of Sir George H. B. Macleod and Dr. Wm. Gordon  
were read and approved of, the Secretary, being instructed  
to engross these in the minutes. (See meeting II.)
- Resignation of A letter was read from Dr. Bertram, Gleadra,  
Dr. Bertram. Pollokshields, intimating his resignation of the  
membership of the G.S.M.S. owing to his going abroad.
- Admission of The following gentlemen were then balloted for  
new members. en bloc, and unanimously admitted members of the Society:  
William Buchanan M.B., 442 Gallowgate.  
Thomas Forrest M.B., 45 Abbotsford Place.  
E. B. Gibson M.D., Victoria Infirmary.  
Thos. K. Inuro M.A., M.B., F.F.P.S.G., 10 Clairmont Gardens.  
William Mr. Millan M.B., Rannochlea, Pollokshields W.  
David Mr. G. G. G. L.F.P.S.G. 45 Abbotsford Place.  
J. Stewart Campbell M.B., 12 Carrington Street.



J. C. A. Smith M.B., 204 Paisley Road W. Meeting (contd.)

Daniel M<sup>r</sup> Nicol M.B., Parkhead Cross.

J. G. M<sup>r</sup> Kendrick M.D., LL.D., F.R.S. The University.

J. C. Howie M.A. M.B., L.M. 4 Bruce Road Pollokshields.

The President then read his paper on "The Utility of Medical Societies". He began by saying that he would not attempt to exhaust the subject, but would be content to introduce it in such a way as to induce discussion from which he hoped profit would be derived. Medical Societies existed for mutual improvement, and they also endeavoured to bring the members into closer contact with one another, and thus promoting friendly intercourse, and in a general way, breaking all barriers, which opposed themselves to intimacy and good fellowship. The social status of the profession as a whole, and of its members, individually, was another form in which Societies could exert themselves. There were various ways in which Societies could act. They could manifest their approval in a very significant fashion of the man of high aims and pure ambitions, and they could create and maintain public opinion. They could act as piecemakers between belligerent members, and enable disputes to be settled in their inception. The efforts at improvement were not to be confined to a section of the Society.



but all the members ought to do a share of work. There was no room for drones. If only a few took part in the work of the Society, it became a small mutual admiration Society, or it became an easy channel to the open sea of popularity. In our Society, some honoured us with their membership, but not with their presence, while others attended with praiseworthy regularity, but did not take any part in the meetings, while others, only a small number, were unhappy unless they were carping over some points of supposed importance. Dr. Couper then pointed out by what means these drawbacks could be overcome. The more careful cultivation of the social element was an important factor in furthering the aims of our Societies. The system we had in vogue a session or two ago of having periodical conversations would, he thought, be more effectual as a means of drawing out the members. He reminded the members present of Rule xxiv which says that "each member is expected according to the order of his admission to read notes of a case or a paper on some subject connected with Medicine or General Science." He had in his own mind questions, which, he believed, would be good subjects for such conversations, as they would draw out from the experience of the seniors information of the greatest value to the juniors, and afford these latter the chance of expressing their

Meeting III (Contd.)

Dr. Couper's address  
(continued)



their difficulties and hearing what could be said in their explication. He thought the appointment of a small committee charged with the examination of new drugs, foods and appliances would be beneficial. (continued)

Meeting III (cont'd)

Dr Couper's address

In such a committee, we required men who could express their views with dignity and effect, and surely such a committee could be formed from the members of the Southern Medical Society. Dr Couper then passed on to speak of a tariff of fees, which would not only guide us in our charges in a general way, but would afford us information in nearly all our dealings. He could not imagine any more effectual method of maintaining our rights in any or all circumstances than the production of a tariff devised and sanctioned after due counsel and deliberation by such a Society as our own. Such a tariff duly authenticated would compel the respect of the public, and in cases of dispute between physician and patient it could be referred to in law courts as a guide and authority. Dr Couper deprecated the method adopted by friendly societies of securing medical services i.e. the giving of appointments to the man who will accept the lowest fee. He thought there was nothing extravagant in the notion that a Society like ours could draw up such a tariff as he had indicated, and to formulate rules necessary for its proper interpretation. Another way in which the utility of our Society could be



be promoted was the presentation of cases for Meeting <sup>to</sup> (Contd.)  
diagnosis. The opinions elicited by the discussions  
might not always be unanimous, but they would <sup>Dr Couper's address</sup>  
be none the less valuable on that account. The (continued)  
benefit of such a course would be felt by the older  
members, just as much as by the juniors; for while  
the younger men might profit by the matured experience  
of the seniors, the latter would also derive advantage  
from learning the newer methods of those fresh from  
the schools, as well as hear the most recent ideas  
prevailing among our leaders in the profession.  
Dr Couper next touched on the value of medical evidence  
in legal cases, and regretted that our profession did  
not show well in court on account of the diversity of  
opinions expressed. Passing from this he said that  
public health questions might occupy our attention  
at some of the meetings. The notification of certain  
infectious diseases was, he believed, a step in the right  
direction. The community ought to insist that  
every person affected with infectious disease should  
be under competent medical supervision until the  
day of danger was passed. He submitted that  
Societies such as ours were the proper channels for  
bringing this idea and similar ones before the  
public. Medical Societies might be of use in  
criticising medical politics, questions relating to



to medical education, the management of hospitals etc. Meeting 10 (cont'd)  
In all of these questions, the fact that there were  
intelligent bodies of men, considering their various <sup>Dr. Couper's address</sup>  
aspects, and having the power and ability to <sup>(continued)</sup>  
express their opinions would act as a powerful  
force on those who assumed their direction.

Dr. Couper concluded by pointing out that we,  
as a profession, were not sufficiently assertive,  
and said that we had it in our own power to  
reform this by our united voice. Any effort to increase  
the respect due to us from the public must come  
from ourselves, and the first step in this direction  
was by shewing that we respected one another.

In the discussion which followed, Dr. Lillier said he <sup>Discussion</sup>  
hoped that Dr. Couper's suggestions would be acted on, and  
asked that, as a Society, we should have more  
professional conversations.

Dr. Halliday thanked Dr. Couper for his paper, and spoke in  
favour of a tariff and a therapeutic committee.

Dr. Munro had listened with pleasure to the paper.  
His experience had been that we heard too much  
of out of the way things. He had a great deal of sympathy  
with the idea of submitting difficult cases to the  
Society. Dr. J. K. Kelly and Brown concurred in  
thinking that a fixed tariff was an impossibility.

Dr. J. Millan had listened with pleasure to the

the paper read, and said it was important to make our Society attractive. Conversational meetings did a lot of good. Meeting in (contd.)

Dr. John Stewart, Parry, Lapraik, Leask and Hamilton also took part in the discussion, and spoke in flattering terms of the paper read by the President.

Dr. Couper briefly replied.

The following gentlemen were then proposed for ordinary membership:- Proposals for Ordinary Membership.

George Thomson M.D.,

Grecadia, Pollokshields W.

Proposed by Dr. Hamilton, Seconded by Dr. Leask.

John Crawford M.B.,

32 Queen Mary Avenue, Crosshill.

Proposed by Dr. Leask, Seconded by Dr. In' Houle.

This was all the business.

David Couper. Pres.



Meeting IV.

11 Bridge St., Glasgow.

24<sup>th</sup> November 1892.

Met the G.S.M.S. the President, Dr Couper in the Chairman  
Chair. Present:- Drs T. Forrest, Dr Tindal, J. V. Wallace,  
Crawford, Leask, J. G. Andrew, Jenkins, Chalmers (Glasg. St.) Sederunt.  
J. Stewart, J. K. Kelly, Howie, St. Clair Gray, Dr. Duncan,  
W. Buchanan, C. W. Stewart and A. S. Tindal - 17 in all.

The minutes of last meeting were read and approved. Minutes of last  
A letter from Dr George Gordon was read thanking the meeting approved of  
Society for the kind sympathy shown on the death letter from  
of his brother Dr W<sup>m</sup> Gordon. The Secretary was Dr George Gordon  
instructed to engross this letter in the minutes.

Copy of Letter received from Dr G. Gordon.

34 Pollok St. Nov. 12<sup>th</sup> 1892.

Dr A. S. Tindal, Secy of the Glas. Luth. Med. Soc.

Dear Sir,

I received the Extract minute of the  
"Glasgow Southern Medical Society, relating to the death  
of my brother Dr William Gordon.

In my mother's, sisters' and my own name, I  
beg to thank the members of the Society for their  
kind expression of sympathy with us in our  
bereavement.

I also thank you for your accompanying kind note.

I am, yours faithfully,  
George Gordon.

A letter from Sir Joseph Lister Bart. was read Meeting iv (contd.)  
and allowed to lie on the table for discussion at Letter from  
next meeting. Sir J. Lister Bart.

Dr. Thomson Greadia, Pollokshields; and Dr.  
Crawford 32 Queen Mary Avenue were then Members admitted.  
balloted for, and unanimously admitted members  
of the Society.

Dr. Duncan then moved that the words in brackets in  
Law ix ("One of whom shall retire annually in order Alteration of  
of Seniority") be deleted. This was seconded by Law ix.  
Dr. A. B. Tindal, and unanimously agreed to.

Dr. St. Clair Gray then read his paper on "Hysterectomy Dr. St. Clair Gray  
abdominal and Vaginal". He began by stating that on "Hysterectomy"  
his object in reading this paper was to evoke a discussion, abdominal and  
which he hoped would be beneficial to all. In the first Vaginal  
place, he would suggest that we should discuss the  
treatment of the pedicle in abdominal hysterectomy; and  
secondly the vaginal excision of the cervix versus vaginal  
hysterectomy in cases of malignant disease of the  
lower portion of the uterus. The abdominal method  
was suitable in those cases where by reason of the great  
size of the tumour, or by its adhesions, it was impossible  
to remove it through the pelvic canal, and also for  
cases of rupture of the pregnant uterus either following  
Caesarean Section, or of spontaneous origin. In this  
operation by the abdominal method, there were three



three steps to consider (1) the abdominal incision (2) the removal of the uterus and (3) the treatment of the stump. In illustration of this operation, Dr. Gray read notes of a case on which he had operated a year ago. The patient had been in failing health for two years, and noticed that there was a gradual enlargement of the abdomen. On examination, Dr. Gray found a tumour of quite the appearance of a nine month's pregnancy, the outline feeling perfectly smooth, and the tumour seemed to contain fluid. The diagnosis lay between an ovarian tumour, and a fibro-cystic tumour of the uterus. There was no clear history of the growth of the tumour. Dr. Gray then gave in detail the steps in the removal of the tumour, which he found to be connected with the uterus. The stump was carefully placed at the lower part of the abdominal wound, kept in position by Tait's pins, and cauterized. The peritoneum was carefully adjusted round the stump, the abdominal wound closed, and the parts dressed antiseptically. The patient made an uninterrupted recovery. Dr. Gray then proceeded to speak of vaginal hysterectomy as practised in this country. He said that this operation was employed for the relief of malignant disease of the lower portion of the uterus, and for cases of irreducible inversion of the uterus endangering life.

Meeting IV (Cont'd)

Dr. St. Clair Gray's

paper continued

life from haemorrhage. He quoted cases of each of these varieties. The first case was one of carcinomatous disease of the cervix in a patient aged 44 years. The uterus was successfully removed by the vaginal method, and fifteen months after the operation, there had been no return of the disease. The operation of vaginal extirpation of the uterus in cases of malignant disease of the cervix in suitable cases, was, he considered, the proper operation to be performed, and the mortality from this operation compared favourably with that in malignant disease of the breast. The point to be aimed at in such cases was the early diagnosis of the disease. Suspicious cases should at once be attended to, and a small portion of the affected tissue removed and subjected to careful microscopical examination. The last case which Dr. Gray narrated was one in which he had removed the uterus for inversion. The inversion had been caused four months previously at patient's confinement by the violent removal of the placenta by traction on the cord by a midwife. Dr. Gray tried to replace the uterus, but failed, and, as the patient was having alarming attacks of haemorrhage, he decided to remove the uterus. He then

Meeting IV (contd.)

Dr. St. Clair Gray:

paper continued.



then gave in detail the steps of the operation. Meeting iv (contd.)

The uterus was well drawn down, encircled with a strong eccrasseur, and amputated. The eccrasseur was left in position for five days, when it was removed, and a small slough separated. Patient Dr. St. Clair Gray's made a good recovery. The third method of paper comb removing the greater portion of the tumour by the abdominal method, and removing the pedicle by the vagina, he had never tried, though the results were said to be good. In conclusion, he asked for a full and free discussion of the subject.

Dr. Duncan: thanked Dr. Gray for the notes of the Discussion cases, which he had brought before the Society.

Dr. J. K. Kelly: said he would suggest the use of pressure forceps instead of ligatures in vaginal cases, as this made the operation shorter. He agreed with Dr. Gray in saying that the whole uterus should be removed in the supra-vaginal operation. With regard to the inversion case, he thought it remarkable that the uterus should be irreducible after four months. He had heard of one reducible after six years. In such cases, in old women, the operation of hysterectomy ought to be performed, as there was constant irritation from rubbing.

Dr. Chalmers (George St.) agreed with Dr. Gray that irreducible cases of prolapse should be

be removed, as it was in keeping with the meeting (cont'd)  
Surgery of the day.

Dr. Jenkins :- asked Dr. Gray how he made a Discussion (cont'd)  
diagnosis between uterine and ovarian disease  
in the first case, and if it were not the case  
that in malignant cases, the obturator glands were  
early infected, and was it not necessary to remove  
these.

Dr. Couper and Leask thanked Dr. Gray for his paper.

Dr. Gray :- briefly replied to the questions asked  
and thanked the members present for the reception  
they had given his paper.

Dr. Chalmers (George H.) then gave notice of motion :- *Notice of Motion*  
"That the members of this Society recognize by a " by Dr. H. Chalmers.  
"testimonial (or otherwise) the eminent services "  
"rendered to our City by Dr. J. W. Allan as "  
"Physician - Superintendent of Belvidere Fever Hospital "  
"for the long period of eighteen years. "

This was all the business.

David Couper. Pres



Meeting V.

23<sup>rd</sup> December 1892.

11 Bridge Street, Glasgow.

Met the Glasgow Southern Medical Society, the President, Dr Couper in the chair. The minutes of last meeting were read and approved of. Present Dr<sup>s</sup> Brown, Dougall, & Tindal, A. Pollok, Hamilton, W<sup>m</sup> & J<sup>r</sup> Millar, J. G. Wilson, Geo. W. Sederunt Thomson, Chas Workman, T. K. Innes, J. L. Steven, Malcolm Black, W<sup>m</sup> Chalmers, J. Wilson Cameron, John S. Rankin, W<sup>m</sup> Carr, James Erskine, A. Innes, & J. C. Howe. 20 in all.

The Society then proceeded to consider the letter received from Sir Joseph Lister requesting a subscription. Consideration of for the "British Institute of Preventive Medicine". Dr Dougall Letter from proposed that: "while the Society approves of the objects of the Institute, the funds will not permit of the Society giving a subscription." This motion was not seconded.

Dr Lindsey Steven: moved that this Society vote a subscription of £10 to the funds of the Brit. Inst. of Prev. Med.

Dr Erskine: seconded Dr Steven's motion on condition that the amount be £5-5/- instead of £10.

Dr Hamilton moved the previous question as an amendment.

This was seconded by Dr John Brown.

Dr Dougall's motion not being seconded fell to the ground.

A vote was taken between Dr Steven's motion and the amendment of Dr Hamilton when Dr Steven's motion was carried by 13 to 6.

Dr Hamilton entered his protest on the ground

ground that he considered it incompetent to pass Meeting & (cont'd.)  
a motion of such a kind without it being printed  
on the billet.

The second item on the billet was the motion by Consideration of  
Dr W<sup>m</sup> Chalmers (of George St.) regarding the a testimonial to  
Testimonial to Dr J. W. Allan (see minute of last meeting.) Dr J. W. Allan of

The motion was seconded by Dr Dougall. Belvidere Hospital.

Dr John Brown:- proposed a direct negative to the  
motion on the ground that the Testimonial should be  
presented by the Medical Profession of Glasgow apart  
from the Society. This was seconded by Dr Hamilton.

Dr Chalmers' motion was carried by 15 to 3.

Dr Lindsay Stewen proposed that a Committee consisting  
of Dr Couper, Chalmers and Dougall along with himself  
be appointed to draw up the testimonial to Dr Allan.

This was agreed to.

Dr Dougall then read his paper on a case of parturition Dr Dougall on  
complicated by Diabetes Insipidus: The case was that of Diabetes Insipidus.  
a primipara aet. 36 years, who, a few days before labour  
complained of great thirst. Patient was passing a large  
quantity of urine free from sugar. Dr Dougall ordered  
his patient a mixture of Phosphoric Acid and lunx Vomica,  
to suck ice and to drink little. In a few days he was  
again called to see her, as her water was stopped, i.e.  
she could not micturate. Labour had by this time  
commenced. He made out a diagonal sulcus between



between the uterus and the bladder. He tried to pass a catheter, but failed. The child's head was pressing on the neck of the bladder, and on displacing it, Dr. Dougall saw the urine gushed out. The labours continued during the night, and the following day, patient was still in distress with thirst and a dilated bladder. He punctured the bladder above the pubes and with the assistance of Dr. J. G. Wilson, applied forceps and delivered patient of a still born child. Five hours after the birth was completed, patient still complained of great thirst, and asked for water. She died eight hours after. On examining the body after death, he found a large quantity of water flowing from the mouth. The abdomen was enormously distended with fluid. In concluding, Dr. Dougall said he was at a loss to account for the illness. He had had two such cases in males, and both got well on ergot and iron.

In the discussion which followed:-

Discussion.

Dr. Couper advocated the use of a soft gum elastic catheters - also the use of Chloroform at an early stage, and the use of Opium.

Dr. Kelly:- thought the extreme distention of the abdomen was due to an over full bladder. He said that the report was incomplete, inasmuch as there was no P.M. examination.

Dr. Wm. Chalmers (George St.) suggested that turning

turning or even perforation of the skull might have been the best treatment. Meeting & Contd.

Dr. Steven:- said that the fluid from the mouth might have been due to regurgitation of fluid from the stomach apart from Diabetes Insipidus. Discussion continued. Dr. Steven had seen two cases of Diabetes Insipidus in Adults in the Royal Infirmary, and one in the Sick Children's Hospital. In one case the Sp. G. of the urine was below 1.000. In one case seen by him, there was enormous distention of the bladder, which disappeared after micturition. He had seen no improvement under treatment of any kind.

Dr. T. K. Inouo:- commented on the duration of the symptoms in the case of Dr. Dougall.

Dr. Workman:- thought the patient had probably drunk water very freely, and that this regurgitated from the stomach freely after death.

Dr. Thomson:- thought that turning would have been preferable to the continued use of the forceps. The induction of premature labour might save the patient's life in cases similar to this.

Dr. Hamilton:- thought there might have been internal post-partum haemorrhage.

Dr. Pollok:- thought that pressure on the ureters may have given rise to a condition of hydronephrosis. He thought that it might



might have been well to have left in a catheter heating & out for some time continuously.

Dr. Dougall, in replying, said he thought Discussion the cause of death was shock. Turning (concluded) would have been very difficult in this case.

The Diabetes Insipidus was indirectly the cause of death.

He uses Ergot as a specific for Diabetes Insipidus.

Dr. T. K. Inoué:- then showed several spec- Dr. T. K. Inoué-imens of hearts with different lesions. The first on affections specimen had a large mass on the left or post- of the Heart-erior curtain of the mitral valve, and a considerable mass on the right segment of the aortic valve.

There were also some very slight vegetations on the left or posterior cusp of the tricuspid.

Infarctions were found in the spleen and kidneys.

Patient aet. 26 yrs. had a well marked rheumatic history. During life there were variable cardiac murmurs, and the enlargement of the organs, temperature, and fatal tendency had raised the question of ulcerative endocarditis. Absence of arterial pyaemia and destructive ulceration of the valves precluded this.

The second specimen weighed 22 oz and showed enormous hypertrophy of the left ventricle, the right looking a mere appendage of the other.

The wall of the left ventricle was nearly any



an inch thick, the septum being greatly bulged <sup>meeting & (concluded)</sup>  
into the right ventricle. There was well  
marked atheroma of the coronary arteries <sup>Dr. T.K. Inoué</sup>  
and aorta. The history of the case shewed <sup>on heart affec-</sup>  
gradually failing health of 8 months duration, <sup>being (concluded)</sup>  
and on admission to hospital patient had  
dyspnoea, cough and dropsy of the legs, back  
and abdomen. Abundant dry rales were heard,  
and the apex beat was displaced downwards  
and outwards. Heart sounds were pure. Urine, Sp. G.  
1010 with abundant albumen. The cause of the  
hypertrophy in this case was probably, in part,  
the kidney condition.

The next specimen showed extreme hypertrophy  
of the left ventricle, which was due to atheroma,  
causing obstruction at the aortic orifice.

The heart in the 4<sup>th</sup> specimen weighed 21 oz  
and was an example of dilatation and hypertrophy.  
The cause in this case was extensive atheroma  
of the aorta, and chronic bronchitis.

Inoué.

Dr. Inoué was thanked for his paper.

The discussion was taken part in by Dr. Kelly,  
Couper, Lindsay, Steven and Workman. Dr. Steven  
thought cases of ulcerative endocarditis could not end  
in recovery; Dr. Workman thought they could.

Dr. Inoué briefly replied.

David Couper Pres



Meeting vi.

11 Bridge Street,

Glasgow. 22<sup>nd</sup> Dec. 1892.

Met the Glasgow Southern Medical Society, the President, Dr. David Couper, in the Chair.

Present Dr. J. Brown, Edmiston, Howie, Geo. Thomson, Malcolm Black, George Marshall, John Wright, C.E. Robertson, Thos. Forrest, Dan. Ingham, James Erskine, J. In. Service, W<sup>m</sup> Chalmers and A. S. Tindal - 15 in all.

The minutes of last meeting were read and adopted.

Dr. Erskine then read his review of the work of Mr. Havelock Ellis on the "Nationalization of Health."

The subject is treated in three ways by Mr. Ellis -

(1) Public Health (2) Hospitals (3) Private practice.

Mr. Ellis says that Chadwick's report in 1831 was the first article which made public health a subject of national interest. Local authorities, he said, are still ignorant and not pay the Medical Officer of Health sufficiently. The "infectious diseases" act of 1889 was a notable forward movement in public health. Among reformers in Health, Mr. Ellis specially mentions the name of Benjamin Ward Richardson, who proposed some years ago to found a "Public Health" department in the Registrar-General's office, and gave a sketch of the rules he would propose. Mr. Ellis points out in his work that he considers every hospital should have a system of notification of all the

the cases occurring in its district, so as to form a guide to the diseases prevalent in the district. Still speaking of hospitals, Mr Ellis criticises the proposal for a central board of government for all hospitals, and mentions the best lines for such a board to work on. Mr Ellis says that patients leaving an infirmary do not have the pauperised feeling of those who have been inmates of a workhouse hospital; but he contends that the one is as much a pauper as the other. He further advocates the use of workhouse hospitals for clinical purposes. Mr Ellis when discussing the nationalisation of education, says he thinks that nationalisation of health would be much more difficult than that of education. In giving a general criticism of Mr Ellis' book Dr. Ruskia quoted some of Sir Thomas More's ideas from "Utopia".

Drs Couper, Robertson, Marshall, Howie, Edmiston, T Forrest and J. Brown took part in the discussion which followed, all of them specially commenting on the admission of patients to hospitals by subscriber's lines. Dr. Ruskia replied.

This was all the business.

David Couper. Pres



Meeting viii.

11 Bridge Street,  
Glasgow. 5<sup>th</sup> Jan. 1893.

Met the Glasgow Southern Medical Society, the President Dr Couper in the Chair. Present, Dr: J. G. Andrew, G. W. Stewart, J. G. Wilson, Th. W. Jenkins, D. Tindal, A. Rankin, J. H. Kelly, H. Leach, J. C. Howie, John Dougall, J. W. Downie, John Brown, A. M. Ramsay, C. E. Robertson, James Hamilton, A. Munro, Thomas Russell, W<sup>m</sup> Buchanan, Erskine, Service, Ed. M<sup>r</sup> Millan and W<sup>m</sup> Chalmers. A. S. Tindal - members. W<sup>m</sup> Weir - visitor. 23 in all.

The minutes of last meeting were read and approved of. Dr: Dougall, Knox and Barras were appointed a committee to draw up a notice of the death of Dr: W. J. Shaw.

Dr: Dougall read the report of Committee appointed to draw up an address to Dr: J. W. Allan. The report was adopted. Dr: Dougall proposed that the Society should authorize the Council to buy a new seal. This was agreed to.

The second item on the billet was that:- "The Council unanimously recommend that the Testimonial to Dr: Allan be presented at a supper to be held on the 12<sup>th</sup> of January."

Dr: C. E. Robertson proposed that the Society entertain Dr: Allan to a dinner, and that the expense be borne by the Society. This was seconded by Dr: A. Munro.

Dr: J. H. Kelly proposed that each pay his own

own subscription. This was seconded by Dr D. Tindale.

The motion was carried by 13 to 8.

Dr Hamilton "protested against the vote taken against Dr Allan's supper on the ground that no mention was made on the billet calling the meeting, that the Society's funds were to be interfered with, and that in consequence the vote was illegal."

The arrangements for the dinner were remitted to the Council with powers.

Dr A. Maitland Ramsay then read his paper on "Diseases of the Conjunctiva." He said that out of 5828 new patients admitted to Charlotte Street Eye Infirmary no fewer than 2550 or 43.7 per cent. were suffering from some conjunctival affection. After describing injuries, including burns from molten metal and from quicklime, and referring to the tumours dermoid, epithelioma and sarcoma, he spoke of the inflammatory affections of the conjunctiva. These were classified into the simple hyperaemia or dry catarrhs, the hyperaemia with discharge, the catarrhal and the purulent, and the hyperaemia with plastic formation the crampous and the diphtheritic. He then referred to the great class of strumous inflammations, phlyctenular, pustular etc. and concluded with a description of follicular and granular conjunctivitis. The etiology and pathology and the clinical appearances presented by each of the various types were described, and



and the principles underlying their treatment were briefly discussed.

The paper, which was illustrated by a large number of coloured lantern slides, and by photomicrographs of various conditions was warmly received by the Members of the Society.

D<sup>rs</sup> Couper, Eiskine, Russell, Hamilton, Dargall and Innes, spoke on the subject, and D<sup>r</sup> Ramsay briefly replied.

James Dunclop M.B., and C.M.,  
298 Bath Street

William Cullen M.B., and C.M.,  
9 Grafton Place

were proposed for Ordinary Membership by D<sup>r</sup> Eiskine and seconded by D<sup>r</sup> A.S. Tindal.

This was all the business.

David Couper Pres

Meeting viii.

11 Bridge Street,  
Glasgow. 19<sup>th</sup> Jan. 1893.

Met the G. S. M. S. the President Dr Couper in the Chair.  
Present Drs Miller, Rankin, Nichol, C. W. Stewart, A. Templeton, Black,  
Thos. Forrest, J. G. Wilson, C. E. Robertson, Geo. Thomson, J. T. Smith,  
Wm. McMillan, John Brown, J. C. Howie and A. S. Tindal - 16 in all.

The minutes of last meeting were read and adopted.  
Dr J. G. Wilson moved and Dr Miller seconded that the  
standing orders be suspended and that the follow-  
ing reports of the dinner to Dr Allan be held as read.  
This was unanimously agreed to.

Complimentary Dinner to Dr J. W. Allan.

Dinner to  
Dr J. W. Allan.  
12<sup>th</sup> January 1893.

Dr J. W. Allan, late physician - superintendent of  
Belvidere Hospital, was entertained to dinner and  
presented with an address in the North British  
Station Hotel by the members of the Glasgow Southern  
Medical Society. Dr Couper, the president of the Society,  
occupied the chair, and Drs Miller and J. K. Kelly  
were the croupiers. Among the other gentlemen  
present were - Professor Charteris, Drs Dougall, Nichol,  
D. C. McVail, Lapraik, William Watson, J. W. Downie, Black,  
C. W. Stewart, Smith, Newnan, William Buchanan, T. K.  
Inoué, A. M. Ramsay, C. G. King, Sam. Sloan, A. Rankin,  
Workman, Thomas Russell, Middleton, J. L. Steven, Mackintosh,  
Marshall, Wright, Howie, Carr, William Chalmers.



Leask, & Davidson, Erskine, C. R. Robertson, Tom Forrest, meeting VIII (Cont'd)  
Alex. Munro, J. Brown, Service, Halliday, Dickson, J. W. Cameron,  
John Adams, Montgomery, P. F. Shaw, Rutherford, & A. D. Tindal - members  
L. Oswald, J. H. Carslaw, Scott (Tollcross), Alex. Robertson,  
Clerk, A. H. Chalmers, W. L. Reid, Duncan (Paisley),  
Mr. Farlane Dr. (Busby), Mr. Pherson (Cambuslang).  
A. R. Prentice, Greenhill and Mr. Wm. Greig. non-members.

After a capital dinner provided by Mr. Rupprecht,  
the loyal and patriotic toasts were given from *Loyal & Patriotic Toasts*  
the chair - Dr. Hewman replying for the defensive forces.  
The Chairman afterwards proposed "Our Guest." "Our Guest"  
He said - "In rising to propose this toast, I would by  
remark that we here this evening by our meeting Dr. Couper  
show most conclusively that we can be animated  
by a spirit very different from the much spoken of  
odium medicum. It has passed into a byword  
that doctors differ with the implication that they do  
little else. Tonight we are demonstrating, coram populo  
in a measure, that we can do agree in generous and  
high appreciation of the high character of one of our number. (Applause)  
The intimation that Dr. Allan was about to sever his  
long connection with Belvidere Hospital came upon most  
of us with a sharp sense of surprise, mingled with a  
feeling that the proposed change was to a great extent  
a public calamity. (Hear, Hear.) Nowhere amongst  
the profession was this feeling more intense than,

than with the Southern Medical Society, and with " Meeting VIII (Cont'd.)  
no other such association, as far as I am aware,  
has the feeling been translated into action. I do not  
know who it was who first suggested public  
recognition of Dr. Allan's retreat, but I am sure  
it is quite fresh within the minds of every one  
that the first formal motion was made by  
Dr. William Chalmers, and that it was immedi-  
ately, and enthusiastically taken up by the Society,  
with the result that we have met here tonight;  
and the large and enthusiastic assemblage which  
we have here is a convincing evidence that the  
Society's idea has been a sound one. (Applause.)  
I need not make any reference to the composition  
of the Society, to vindicate its claims to speak in a  
great measure as the body which most fully  
represents the general profession, for the Society  
is now approaching its jubilee year; its reputation  
as a most active and energetic association of  
general practitioners has long been established, and  
is still maintained as efficiently as ever; and it may  
be said with confidence that at no period of its  
career has it had the services of a council more  
able or anxious to keep in touch with the ideas  
of the whole profession. (Applause.) The Council are  
convinced that as a profession we do not take that



that position or exert that influence on public opinion Meeting VIII (Contd.)  
that we ought to do, and they hold for this, among  
other reasons, that in marking the departure of  
Dr. Allan from Belvidere they are doing a public  
duty, which has not otherwise been recognised  
except by a few letters to the newspapers. (Applause)  
There is little need for me to dilate upon the  
numerous claims which Dr. Allan might make  
on our attention. Though too little known, or regarded  
by the public, his work is well known and appreciated  
by the profession. (Applause). Others of our cloth  
are known far and wide, some on account of their  
eminence in the profession, for their hard, persevering  
labour and untiring energy, and others for qualities  
which do not so readily command respect. (Laughter)  
And it is a justifiable source of gratification to most of  
us, I am sure, to think that at no previous period of her  
medical history has Glasgow stood so high in reputation  
as it does at the present moment, when so many  
men of more than European fame are amongst its  
practitioners and teachers. (Applause). The interest the  
Glasgow school inspires may be gauged from the fact  
that the illustrious occupant of one of our University  
Chairs received congratulations at the conclusion of his  
successful candidature from the democratic city of  
Chicago on the west, and from the imperial city of

of Moscow on the east, from Stockholm on the north, and Naples on the south. But Dr. Allan's claims on our regard are more peculiar to ourselves. Far from the madding crowd he has, for the last 18 years, pursued his career of modest usefulness, doing his duty heartily, yet without ostentation. (Applause.) He has made no attempt to advertise himself or put himself forward, and every one who has even the slightest acquaintance with him, will bear me out when I say that self-seeking has always been utterly foreign to his nature. (Applause.) As physician-superintendent of the largest fever hospital in the British islands, outside of London, his efforts have been untiringly devoted to increasing and maintaining the efficiency of the institution, and no effort was ever too great and no detail too trivial for his attention. It is almost wholly due to Dr. Allan's personal efforts that the hospital is now regarded as second to no other establishment of the kind anywhere; and while true that this is largely due to his unwearied and ungrudging exertions, it is also true that the enthusiasm which Dr. Allan's personality and character evoked in his assistants was also a factor of immense importance in conducing to the same end. (Applause.) That the influence he has exerted on his assistants has



Meeting VIII. (contd.)  
"has been genuine and deep and lasting admits"  
"of little doubt. I at least can say that I have met"  
"with none of them, who did not confess with gratitude"  
"his indebtedness to his chief (Applause.) The relations"  
"of outside practitioners to Dr. Allan have been pleasant"  
"and beneficial in the highest degree. Let us go when"  
"we would, let us write when we would, we were always"  
"certain of prompt and kind attention, without the slightest"  
"trace of red-tapeism, of irritation or of patronage."  
"The fullest liberty to inspect the wards and to"  
"ascertain the treatment were unhesitatingly granted,  
"and any information the most curious of visitors"  
"could require was freely granted, and with such"  
"tact and sweet reasonableness that hostility, if it"  
"existed was immediately disarmed, and the visitor"  
"led to imagine that he was the giver rather than"  
"the recipient of good. (Applause.) There is nothing"  
"that is so distasteful to a really modest and able"  
"man than to hear his praises sung in this fashion,"  
"and as I am afraid that any further remarks in"  
"this direction may prove distasteful to our guest,  
"I will, before reading the address which has been prepared"  
"for him, express the hope that the large experience"  
"he has gained and the lofty qualities he possesses"  
"may in future be at our service in hours of difficulty"  
"and danger, and that, if it be possible, the

the suggestion made by Dr Charles F. Pollock may Meeting VIII. (Contd.)  
be carried into effect - that Dr Allan be  
appointed honorary consultant to the hospital -  
a step which if taken, would reconcile the  
profession to the change, and inspire the public  
with renewed confidence in Belvidere (Applause.)

The Chairman then read the address, which  
was in the following terms:-

To James Watson Allan Esq M.B., C.M., late  
physician-superintendent of Belvidere Fever  
Hospital, Glasgow.

Copy of  
Address  
presented to  
Dr J. W. Allan.

Sir,

The Glasgow Southern Medical Society  
learning that you have resigned your office  
as physician-superintendent of Belvidere Fever Hospital,  
Glasgow, desire to express their high appreciation  
of your long and faithful services (eighteen years)  
in the cause of public health, and of your great  
practical experience in the treatment of infectious  
diseases. The members of the Society, being for  
the most part engaged in active general practice  
in the city of Glasgow, have had abundant oppor-  
tunities of experiencing your special medical skill  
and your valuable and courteous assistance  
in cases of emergency. They feel that they  
could not let this occasion pass without thus



"thus expressing their high estimation of your  
"amiable disposition, kindness of heart, devotion to  
"duty, high standard of professional integrity,  
"and eminence as a practical physician. The  
"members sincerely hope that the general public  
"and your medical brethren will not be entirely  
"deprived of your valuable professional counsel  
"and assistance, and that you may still have before  
"you a long career of usefulness and prosperity."

Meeting VIII (Contd.)

On behalf of the Society (signed)

David Couper M.D., President.

Jas. K. Kelly M.D., F.R.P.S.G. Vice-President.

Andrew Stewart Tindal M.D., Secretary.

John Brown M.D., Treasurer.

James Breckin M.A., M.B., Seal-keeper.

Glasgow 12<sup>th</sup> January 1893.

The toast was drunk with Highland honours, the  
Company singing "For He's a jolly good fellow."

Dr. Allan, on rising to reply, was received with loud  
applause. He said - "I am sure you will not expect me"  
to express all that I feel to-night. It is simply impossible.  
When I look around and see so many kindly faces I am  
assured you I feel that I have this night got a very great  
reward. I see around this table old friends and young  
friends, and notably my old friend Dr. Dougall with  
whom many a time and oft I have faced the dreary

Reply by

Dr. J. W. Allan.

Meeting VIII (Contd.)

"courts of the old College in High Street. I can  
"honestly say that in his society I learned a very  
"great deal, and I shall always be grateful to  
"Dr. Dougall, for his kindness in those old student  
"days (Applause.) It would be a poor return  
"for the kindness you have shown me to-night were  
"I to inflict a long speech on you. But nothing  
"is further from my thoughts. For good and  
"prudent reasons my words shall be few. It  
"affords me the greatest satisfaction to find that I  
"have the goodwill of my professional brethren.  
"(Applause.) The honour which has been conferred  
"on me to-night is one which I shall never forget.  
"Reference has been made to my work at Belvidere.  
"The source of the success of that work may be  
"summed up in one word - unanimity. It has  
"been due to the hearty and honest co-operation  
"of the Belvidere staff. Doctors, matron and nurses  
"all true to each other and to their duty - have all  
"been actuated by one desire - namely, that the  
"hospital should perform its function in the best  
"possible way, and that the patients should receive  
"the greatest possible good. (Applause.) That is  
"the secret of the success of Belvidere - the sub-  
"ordination of all personal interests, tastes and  
"desires to the main purpose - viz. the efficiency of



Meeting VIII (Contd.)

"of the hospital. (Applause.) I believe there never was a more faithful and devoted band of officials than my dear friends in Belvidere, and I shall always think of them with affection, and wish them every good from my heart of hearts. (Applause.) How can I thank you for your kindness to me to-night? It has given me the greatest possible gratification. I feel that this recognition on the part of the Glasgow Southern Medical Society is one of those spontaneous acts of goodwill which leave an indelible impression on the heart of the recipient, and coming from my professional brethren it is peculiarly comforting.

Our profession is a brotherhood. This thought should never be lost sight of in our dealings with each other. In my professional work at home and in my travels abroad I have felt the subtle charm of this sacred bond. The ready confidence, the friendly welcome - these are heart stirring experiences never to be forgotten. I feel that the honour which has been conferred on me by the Glasgow Southern Medical Society is a distinction of which I may well be proud, and I can assure you that I duly appreciate it. (Applause.)

Dr. Hiddleston Mackintosh  
on behalf of the "Old  
Belvidere Residents".

Dr. Hiddleston and Mackintosh spoke on behalf of the "Old Belvidere Residents" and Dr. Wm. Watson on behalf of the present staff - all of them expressing

Meeting <sup>viii</sup> (Contd.) their high appreciation of Dr. Allan, and each speaking of personal benefits received from him.

G.S.M.S. by Dr. A.K. Chalmers. Dr. A.K. Chalmers proposed "The Glasgow Southern Reply - Dr. J.K. Kelly. Medical Society" and Dr. J.K. Kelly acknowledged the toast. Dr. Miller proposed "Kindred Societies" and Dr. J.W. Downie, Lindsay Steven, and Sam. Sloan replied. Dr. Prokine gave "The University and Medical Schools" and Prof. Charteris, Dr. W.L. Reid and Dr. Dougall responded. Dr. Davidson proposed "The Ladies" and this was replied to in graceful terms by Dr. C.E. Robertson.

Songs.

During the evening songs were given by Dr. Carlaw, Carr, Davidson, Watson, Marshall and Forrest. Dr. John Adams gave an amusing selection from Mark Twain's "Innocents Abroad".

The meeting <sup>was</sup> brought to a close by the company singing "Auld Lang Syne".

Suspension of Standing Orders.

The President moved, and Dr. Howie seconded that the standing orders be suspended, and that the gentlemen proposed for membership be balloted for en bloc. This

Dr. James Dunlop & was agreed to, and Dr. James Dunlop 298 Bath Street, Dr. Cullen admitted and Dr. William Cullen 9 Grafton Place were unanimously admitted members of the Society. The Secretary

Obituary notice of Dr. W. I. Shaw.

then read the obituary notice of Dr. W.I. Shaw, which had been drawn up by Dr. Dougall, Knox and Barras. Dr. Miller proposed and Dr. Cuper seconded that



Meeting VIII (Contd.) that the notice be engrossed in the minutes, and that a copy be sent to Mr W. D. Shaw. This was unanimously agreed to.

Letter from Dr. Brown read a letter from Dr. W. T. Gairdner apologising for his absence from the dinner to Dr. J. W. Allan.

Copy of Dr. Shaw's  
Obituary notice. The following is the obituary notice of Dr. Shaw: "The Members of the Glasgow Southern Medical Society" having heard of the death of W<sup>m</sup> John Shaw M.B., Ch.D., on 1<sup>st</sup> January 1893, desire to herewith express their sincere sorrow at the sad event. Dr. Shaw joined the Society in 1880 and held the office of Sealkeeper in 1886. For a few years he was frequently present at the Society's meetings, and took considerable interest in its business, his sensible remarks, kindly courteous manner, and gentlemanly bearing always gaining for him the esteem and respectful attention of the members.

For some years he acted as assistant Surgeon to the Royal Infirmary, he was also Examiner to the St. Andrew's Ambulance Association, besides holding several other appointments. Although not of a robust constitution, he taxed his time and strength to the utmost in the faithful discharge of his varied duties. At Govan where he practised, he was much beloved and honoured by his numerous patients and friends, &c.

Meeting <sup>viii</sup> (cont.) and his death when scarcely in the prime of man-  
-hood, they all greatly lament.

Dr. Couper on Dr. Couper then introduced the Discussion on the  
"The Diagnosis of Scarlet Fever." He said that the diagnosis  
of Scarlet Fever was generally made with ease, but cases  
do occur in which it is difficult to be certain what  
they are. Dr. Couper dwelt on the necessity of differ-  
-entiating between cases of Scarlet Fever and Syphilis,  
and related two cases which had occurred in the  
Western Infirmary during his student days, in  
which cases of Scarlet, had been mistaken for  
Syphilis and Erysipelas. Dr. Couper did not think  
there was anything peculiar in surgical scarlet fever -  
except its very sudden appearance. Sir James Paget,  
he said, gives some attention to this form as a complica-  
-tion of injuries, but he does not consider it to be in any  
way different from ordinary Scarlet Fever. Dr. Couper  
had not had any difficulty in distinguishing  
between Scarlet Fever and Measles, but thought it  
quite conceivable that in some sporadic cases, the one  
might be taken for the other. In cases of pronounced  
Measles, he had certainly seen tongues resembling  
very closely the "strawberry tongues" of Scarlet Fever.  
He mentioned Trousseau's name in speaking of the  
Scarlatinaform rash seen in cases of Varioloid Small-  
pox, and said that some experienced physicians, even



Meeting VIII (Contd.) even when recognizing Small-pox, concluded that  
Dr Couper on "The it was complicated with real Scarlatina. In  
Diagnosis of Scarlet speaking of the rash seen in cases of Rheumatism,  
Fever" (continued) Dr Couper thought that the chief difference consisted  
in the absence of the concomitant symptoms of Scarlet,  
while those of Rheumatism were present. Further,  
he said, that sweating in cases does not preclude  
altogether the diagnosis of Scarlet. He concluded  
by showing desquamative scales from a case of  
Pityriasis Rubra, and read Dr Brocq's description of it.

Discussion on Dr Miller :- did not think that the diagnosis of Scarlet  
"The diagnosis of could be made from the throat alone. He was in the  
Scarlet Fever" habit of isolating all suspicious cases. Scarlet  
cases were infectious from the throat even when there  
was no rash. He thought the desquamation in cases  
of Pityriasis Rubra not very like that of Scarlet.

Dr Howie :- referred to the pulse in scarlet being quick.

Dr Thos. Forrest :- spoke of a case he had had that day,  
which he concluded was Small-pox. The primary  
symptoms were those of Scarlet, only there was no  
sore throat. In surgical cases, in hospital, it was  
possible that the case might be due to contact with  
infected people.

Dr J. G. Wilson :- spoke of the difference between Scarlet,  
and Quinoy with a rash.

Dr C. R. Robertson :- thanked the President for the

Meeting VIII. (Concluded) able way in which he had introduced the subject.

Discussion (contd.) The diagnosis of Scarlet Fever, he said, was one of the greatest stumbling blocks to him in practice.

Dr. John Brown:- had not found much difficulty in diagnosing his cases, but he never sent in his notifications till he was absolutely certain.

Dr. Couper and Forrest replied to several questions asked by members present.

Proposals for Ordinary membership The following gentlemen were then proposed for ordinary membership:-

William Wallace M.A., M.B., C.M., L.D.S. 36 Dundas Street.

Proposed by Dr. Leach, Seconded by Dr. John Brown.

William Weir M.B., C.M., 4 Melrose Street.

Proposed by Dr. A. M. Ramsay, Seconded by Dr. A. S. Tindal.

Alexander Robertson M.D., F.R.C.S. Glas. 16 Newton Terrace.

Proposed by Dr. Couper, Seconded by Dr. Miller.

Notice of Motion Dr. J. G. Wilson then gave notice of motion:-

by Dr. J. G. Wilson. "That business be the last item on the billet, unless it be agreed to otherwise by two thirds of the members present."

This was all the business.

David Couper Pres



Meeting ix.

11 Bridge Street, Glasgow.  
16<sup>th</sup> February 1893.

Chairman.

Met the Glasgow Southern Medical Society,  
the President, Dr Couper, in the Chair - Present  
Drs C.E. Robertson, H. L. G. Leach, Dr. Black, C. Workman,

Sederunt.

J. H. Kelly, Geo W. Thomson, T. Forrest, R. T. Halliday,  
J. C. Howie, J. Wright, J. L. Steven, & A. S. Tindal - 14 in all.

Minutes passed.

The minutes of last meeting were read and  
approved of. A letter from Mrs W. J. Shaw was  
read acknowledging the copy of the Obituary  
notice of her husband sent her, and thanking  
the Members of the Society for their kindness  
and sympathy.

Suspension of

standing orders.

Dr C.E. Robertson moved, and Dr Halliday  
seconded that the standing orders be suspended,  
and that the gentlemen proposed for Membership be  
balloted for en bloc. This was agreed to, and Dr

Admission of  
new members.

W<sup>m</sup>. Wallace, W<sup>m</sup>. Weir and Alex. Robertson were  
unanimously admitted Members of the Society.

Dr Walker Downie was unable to be present owing  
to illness, and his paper was postponed till the  
next meeting.

Dr J. Lindsay Steven  
on "Morgagni".

Dr J. Lindsay Steven then read his paper on  
"The Life and Works of Morgagni".

Dr Steven said that it was a useful and  
befitting thing that we should occasionally

Meeting IX. (Cont'd.)

Dr. Steven's paper,  
(continued.)

occasionally turn our thoughts backwards to those to whom we owed so much. Up to Morgagni's time we had no scientific medicine, i.e. medicine, as we now understand it did not exist. Morgagni's era might be called the Clinical and Pathological one, as he unconsciously broke away from the ordinary methods of his time. He might well be called "the product of the time". The industry with which Anatomy and Physiology were being studied all over Italy, might be said to have produced Morgagni. At this stage, Dr. Steven passed round a photograph of Morgagni, which had been retaken by Dr. Workman from one of Morgagni's works. Dr. Steven rapidly sketched Morgagni's early career. He was born at Pavia, 40 miles from Bologna in 1781, and received his education in his native town. At the age of 16, Morgagni went to study at Bologna under Valsalva. At the age of 19 he got his degree, and became assistant to Valsalva, who, at that time was working at the ear. From Bologna, Morgagni went to Venice and Padua. On the advice of his teacher, he remained at Padua, and was appointed Junior Professor of Anatomy, and in 1815 he became first Professor. He died in 1871 at the age of 90. He had a large family, eight of whom survived him.



Meeting 12. (continued) During his life time he received substantial recognition of his work from Scientific Societies of several nations, and also marks of esteem from Royalty and three Popes. His fellowtownsmen did him honour by placing his bust in the town hall of his native town. As Morgagni's principal works Dr. Steven mentioned "History of Medicine," "Life of Celsus" and also works on Archaeology and Pathology. His work on Pathology consists of six large volumes dating from 1806 to 1841, and in them he corrected the views of previous writers. He shewed that Malpighi's views on certain points with relation to the fat of the body were wrong. Morgagni believed only that which his reason approved, and his reason he also observed to experience and prudence. Morgagni's works shewed his modesty throughout, and Dr. Steven said that it was difficult to say whether we would admire more his modesty, high honour or downright commonsense. Dr. Steven concluded by saying he had accumulated more about Morgagni, but he did not put it into form further than in his note book.

Drs. Couper, Erskine, J. H. Kelly, Workman, Leask and Robertson thanked Dr. Steven for his paper, and Dr. Steven briefly replied.

This was all the business.  
David Couper Pres

Meeting<sup>x</sup>.

11 Bridge Street,  
Glasgow. 16<sup>th</sup> Feb. 1893.

Met the Glasgow Southern Medical Society the  
Vice-President Dr J. K. Kelly in the Chair.

Present - Drs John Brown, J. G. Wilson, James Hamilton,  
Geo W. Thomson, David Tindal, J. C. Edmiston, Thos Lapraik,  
J. W. Cameron, A. Rankin, W<sup>m</sup> Cullens, J. C. Howie, D. In'icoll,  
J. G. Andrew, Andrew Wilson, Alex. Miller, A. L. G. Leask, C. E. Robertson  
and A. S. Tindal - 19 in all.

The minutes of last meeting were read and  
approved of.

Dr J. G. Wilson then moved "That business be the  
last item on the billet, unless it be agreed otherwise  
by two thirds of the members present."

There was no seconder for this motion, and it fell  
to the ground.

Dr Walker Downie then read his paper on "The treatment  
of Fractures of the nose." He said that he had chosen  
the subject, as such injuries to the nose were by no  
means rare, and unless carefully treated, they  
resulted in such deformity as to seriously affect  
the patient's appearance. Dr Downie mentioned the  
various methods by which such fractures were caused,  
namely blows received in quarrels, falls from a height,  
railway collisions by violent contact with the sufferer's  
vis-a-vis - injuries received in the Cricket & Football fields.



Meeting x (Contd.)

In his experience he found that the nasal bones were the structures most affected in such accidents. Associated with all fractures, he generally found that there was more or less tearing of the lining mucous membrane of the nose, accompanied by profuse haemorrhage. The size and general appearances of the injured feature might be greatly altered by swelling and ecchymosis the result of the bruising of the soft tissues, and so great might the swelling be that detection of fracture was difficult and in some cases impossible, and to clearly determine the structures involved at the early stage, was often out of the question. In cases where the lachrymal bones were implicated, the fracture might be complicated by emphysema of the eyelids, and the cellular tissue around the orbit. When this condition was present, the patient required careful treatment, as, if a sinus were left, there might be permanent emphysema. In speaking of the treatment, Dr. Downie first demonstrated the best method for arresting the haemorrhage. He then passed in review the different methods for replacing the fragments of bone, and showed several of the instruments which he employed for the purpose. He found that of the many forms of apparatus which had been introduced to keep the fractured bones in position, masks made of

Meeting x (Cont'd.) of sheet lead gave the best results. He showed intranasal splints also made from sheet lead, and said that he preferred this material on account of the readiness with which it can be modelled to fit accurately any form of nose, and on account of its weight. At the end of four days the intra-nasal splints might be removed and not returned, and the external splints after six days, the parts inspected, and the splint re-applied. The splint need never be worn more than two weeks in all. In conclusion Dr Downie said that he had modified the shape of the splints since first employing them, and that in many ways, he had been able by their help to obtain results of a very satisfactory character.

Dr Miller, Howie, Wilson Cameron, Edmiston, Geo Thomson, and J. H. Kelly took part in the discussion which followed and Dr Downie briefly replied.

Dr John Brown then took the Chair and Dr J. H. Kelly read his paper on "Gynaecology in General Practice". Dr Kelly said that he had chosen the subject as it was one of great importance to the general practitioner. A great many gynaecological cases resulted from badly managed or difficult labours and from septic infection such as gonorrhoea. Dr Kelly rapidly passed in review the main causes of enlargement of the uterus, and then proceeded to speak of,



Meeting x (Contd.) of the treatment. As a rule he found that applications to the endometrium such as Iodised Phenol, gave unsatisfactory results. In such cases, he invariably put the patient under chloroform, and curetted the whole uterine cavity. Then he washed out the cavity with a 1 to 80 carbolic solution, then slowly injected Tk. Iodi, using a small glass syringe with a long vulcanite nosel. Finally, he douched the uterus with a weak antiseptic. When performing this operation, the patient should be in the lithotomy position, and the vagina dilated with a Martin's Speculum. Dr. Kelly, employs this operation in post partum febrile cases - caused by retention of parts of placenta or membrane, and also in cases where there is chronic Endometritis and consequent Metorrhagia. He quoted several cases where this operation had been performed by him with gratifying results, and showed several of the newer gynaecological instruments. An interesting discussion followed in which Dr. C. E. Robertson, Leask, Miller, Howie, Cullen, Edmiston, Thomson and Brown took part, and Dr. Kelly replied, answering several questions which had been asked.

This was all the business.

David Gouper Pres

Meeting xv.

Victoria Infirmary,  
2<sup>nd</sup> March 1893.

Met the Glasgow Southern Medical Society, the President, Dr. Couper, in the Chair.

Present :- Drs J. K. Kelly, F. Duncan, J. Brown, T. W. Jenkins, T. Forrest, Mr. Black, Weir, D. Tindal, A. Miller, S. Thomson, G. Gibson, Workman, Howie, J. W. Cameron, Ed. Mr. Miller, Edmiston, R. H. Parry, D. Mr. Nicol, P. Hodge, A. H. Montgomery, Wm. Wallace, Moffat, Hamilton, C. E. Robertson, Napier, A. Rankin, Fraser Orr, A. S. Tindal-Hambers.

A. K. Chalmers M.D. H. J. J. Boyd, Young and Logie-Visitors.

34 in all. On the motion of Dr. Miller, the reading of the minutes was postponed to a future meeting.

Dr. Eben. Duncan then shewed his cases.

Case T:- Petit Mal - Male patient aet. 40 yrs. First turned ill with a convulsion which lasted ten minutes. He had a second attack six months after. The third attack was one of general convulsions. In December last, he had six attacks in the one week. In January, he had about 20 in one day. For the last two years, patient had complained of pain in the vertex of the head. There was a history of syphilis some years ago. Six months after marriage patient's wife had two miscarriages. The history raises the question of syphilitic affection of the brain. The administration of Iodide of Potassium caused a



a marked cessation of the fits. Should the fits continue, Dr. Duncan would consider the propriety of cutting down to find if there was any gross lesion over the motor area.

Case II:- Shewn, was one of Locomotor ataxy, with well marked eye symptoms.

Case III:- was one of Paralysis of the Third Nerve.

Case IV:- Dr. Duncan then shewed two girls suffering from Chorea. There was no history of rheumatism in either case. There were no cardiac murmurs detected on admission, but one had developed what was presumed to be a haemic murmur. As regards treatment Dr. Duncan said he considered rest and Arsenic to be the best therapeutic agents.

Case V:- was one of long standing granular disease of the kidney, with well marked atrophy of the optic nerves.

Dr. Workman, Edmiston, Miller, Napier, Howe, Atkinson, Mr. Millan and the President took part in an interesting discussion and Dr. Duncan replied. Owing to the lateness of the hour, Dr. Napier's demonstration was postponed till an Extraordinary Meeting of the Society, to be held on the 9<sup>th</sup> of March.

Dr. R. H. Parry shewed a case of cerebellar tumour.

Proposed for Ordinary Membership. Alex. Scott M.D., Tolleross proposed for the Ordinary Membership by Dr. Innes seconded by Dr. Couper.

This was all the business. David Couper Pres.

Meeting <sup>xii.</sup>

Victoria Infirmary,  
9<sup>th</sup> March 1893.

Chairman.

An Extraordinary Meeting was held in the Victoria Infirmary, the Vice-President, Dr J. H. Kelly, in the Chair. Present Dr<sup>s</sup> E. Dr<sup>s</sup> L. L. Millan, D. Tindal,

Sederunt.

J. Brown, A. Miller, H. Dr<sup>s</sup> A. Houl, Leach, Howie, Pollok, Andrew, Jenkins, Duncan, Lapier, G. Thomson, Montgomery, Hodge, Crawford, Dr<sup>s</sup> Nicol, J. S. Rankin, Hamilton - Members.

Young - visitor - 21 in all.

Minutes.

The reading of the minutes was postponed owing to the absence of the Secretary.

Demonstration

Dr<sup>s</sup> Lapier gave a demonstration of cases, and showed patients.

of Cases by

He first showed a case of myxoedema which had been under treatment with sheep's thyroid last year.

Dr<sup>s</sup> Lapier.

The success of the treatments at the time had been brilliant, but it had not been maintained: the patient had evidently relapsed, so far as the thickening of the subcutaneous tissue went, though mentally and as regards speech there had been no relapse. The patient was to be re-admitted to the Victoria Infirmary for renewed treatment. Dr<sup>s</sup> Lapier remarked that a similar relapse had been noticed in one of his private patients, but that a very few doses of thyroid gland had set right again, and that in such cases it was something to be able to say that a condition hitherto so intractable can be removed and prevented from



Meeting XII-

(Continued.)

Dr. Lapiere's

Demonstration

(Continued.)

from recurring by a few occasional doses of thyroid. He also shewed some dissections of sheep's thyroids pointing out the characteristic appearance of a healthy gland, and drawing special attention to the frequency with which the gland in the sheep is the seat of disease of a gross kind: in 26 consecutive dissections he had found the gland diseased in 10 cases.

Dr. Lapiere then shewed two cases of acute nephritis, in which the amount of Albumen present in the urine had been very trifling, in which the symptoms had been of a very grave type (most severe uraemic convulsions in one case) in which also recovery had been rapid and complete. In one of the cases, that marked by uraemic convulsions, improvement dated from venesection to the extent of 20 fluid ounces.

A case of aortic aneurism was then exhibited in which symptoms of physical signs were not at all well marked, but diagnosis was based on the persistent pain in the left side of the chest and left arm, aphonia with paralysis of left vocal cord, well-developed tracheal tug, slight dysphagia, and a slight enfeeblement of pulse in the left radial and carotid arteries.

Three cases of malignant abdominal tumours were then shewn. In the first case the tumour was

Meeting xii- was situated at the lower end of the oesophagus.  
(Continued). the stomach tube passing only to a depth of  $14\frac{1}{2}$  inches when a stricture was encountered.

D. Laperie's demonstration In the second case the growth was in the cardiac  
(Concluded.) end of the stomach, and both kidneys were very moveable particularly the right. In the third case the tumour was pyloric, and the stomach was enormously dilated; some of the stomach contents had been drawn off, filtered and tested for the presence particularly of free Hydrochloric Acid which was found to be absent. 10 grains of Salol also had been given to the patient and the urine passed  $2\frac{1}{2}$  hours afterwards gave no phenol reaction facts which proved the existence of some malignant obstruction to the free passage of fluids from the stomach into the duodenum.

A short discussion followed the exhibition of the cases, and this was all the business.

David Couper Pres.



Meeting xiii.

11 Bridge Street,  
Glasgow. 16<sup>th</sup> March 1893.

Chairman. Met the Glasgow Southern Medical Society, the President Dr Couper in the Chair. Present Dr Brown, C.E. Robertson,

Sederunt. H.L. G. Leach, J.C. Edmiston, Ed. In<sup>3</sup> Millan, Freeland Fergus, H. Kelly, Andrew Wilson, W<sup>m</sup> Weir, J. G. Andrew, J. C. Howie, Thos. Forrest, Thos. Russell, A.S. Tindal = Members. Geo. Hunter & R. Young = Visitors.

Minutes passed. 17 in all. The minutes of the three last meetings were held as read and adopted on the motion of Dr C.E. Robertson.

Admission of a new member. Alexander Scott M.D., Tollcross was then balloted for as an Ordinary Member, and unanimously elected.

Dr Fergusson: Dr Freeland Fergus then read his paper on "The best methods for the treatment of hard and soft cataracts, and corneal wounds". He said it was now ten years since he cut his first cataract. Now the operation is much improved owing to the antiseptic precautions taken.

Dr Fergus considers the environment of the patient as a most important factor in influencing the success or otherwise of the operation. He advises strict cleanliness in everything. His first operation was on a very unsuitable patient - one who was old and dirty. In this case, he regretted to say, he had made a downward incision in the cornea at the commencement of the operation. This was the only case in which he did this. Now Dr Fergus considers that a downward incision is a relic of pre-iridectomy days. With regard to

Meeting XIII (Contd.) to preliminary iridectomy, he considers that it always makes the patient apprehensive, and while the patient is waiting for the second operation, he is as blind as ever.

Dr. Fergus's paper  
(continued.) A patient on whom the combined operation is performed is generally better at the end of ten days. From a large number of cases, Dr. Fergus is assured that preliminary iridectomy is a mistake.

Dr. Fergus then proceeded to give the detailed steps in operating for cataract. The preliminary incision should be large enough to allow the lens to pass freely. In only one occasion he had to enlarge the wound, and he always endeavours to puncture at the corneal margin. Dr. Fergus always uses boracic acid solution to cleanse the parts after operation, as he found that perchloride of mercury caused precipitation of albumen on the edges of the wound, and thus hindered healing. He employs cocaine as an anaesthetic, and the solution is always made with boiling water immediately before the operation.

The incision is made in the capsule in the shape of a T, and often on finishing the incision, the operator occasionally sees that he can complete the operation without iridectomy. The iridectomy should always be done, otherwise the percentage of failures is great.

Dr. Fergus always keeps in the speculum till the removal of the lens, and he objects to pressure with the finger on the eyelid as it may cause escape of the vitreous humour.



Meeting XIII (Contd.) He is in the habit of using Snelling's curette for the evulsion of the lens. The dressings used are Gangee Tissue and plaster, and the eye is usually dressed daily. Acute iritis, following operation, in his experience is septie, and is therefore preventible. Dr Fergus then discussed the various methods for operating on congenital cases of cataract. Such cases are best treated by opening the capsule freely, and being seen daily by the surgeon. The lens is allowed to macerate for a week, and then extracted. Often after Cataract there are great errors of vision, generally about two dioptries. Dr Fergus corrects all cases particularly, especially the astigmatism.

Discussion. Dr Couper:- Thanked Dr Fergus for his paper, but was unable to offer any criticism on it.

Dr Hunter (visitor) thanked the President for the privilege of being present. He had been present at Dr Fergus's first operation. He was not quite converted to all Dr Fergus's ideas. He gave some interesting reminiscences of the methods in use while he was a "Resident" in the Eye Infirmary, and recollected well when antiseptic precautions were altogether unknown.

Drs E. L. Millan, Russell, and Townie also spoke, and Dr Fergus replied.

This was all the business.

J. K. Kelly  
V.P.

Meeting XIV.

11 Bridge Street,  
Glasgow. 30<sup>th</sup> March 1893

Chairman. Met the Glasgow Southern Medical Society, the President, Dr Couper, in the Chair. Present Drs J. Brown, Alex. Robertson,

Secretary. Dr Tindal, W<sup>m</sup>. McMillan, T. W. Jenkins, Thos. Forrest, A. L. G. Leask, J. W. Thomson, R. T. Halliday, J. T. Smith, M. Black, Alex. Miller, R. Pollok, James Prokine, James Hamilton, A. Rankin, J. C. Howie and A. S. Tindal - 19 in all.

Minutes passed. The minutes of last meeting were read and approved of.  
Dr Pollok :- read his paper on Endometritis and its treatment. He said that Endometritis might be caused by many things, subinvolution after labour, cold after menstruation etc. The cause of the subjective symptoms could be easily explained by the free anastomoses of the vessels of the uterus. The treatment should always be commenced as soon as possible after the diagnosis has been made. One important step in treatment is to remove all vaginal discharge. The constant application of strong applications to the endometrium Dr Pollok considers to be highly objectionable, as by this means other irritations are set up. Rest, restriction of diet, warmth by means of injections go to make up the treatment in the first instance. If the symptoms go on, we should curette. This involves rest and depletion, and often checks haemorrhages. All through the treatment, there should be strict attention to cleanliness and antiseptics.



Meeting XIV (Contd.)

Dr. Couper thanked Dr. Pollok for his paper, but said he avoided such cases in private practice.

Discussion. Dr. D. Tindal:- agreed with most of Dr. Pollok's paper. He thinks the general treatment is also beneficial.

Dr. Miller:- had found such cases very difficult to treat in private. He followed much the same treatment as that laid down by Dr. Pollok.

Dr. Jenkins:- thought that Endometritis was due to a micro-organism. In low health of the individual, the germ penetrates and finds a fitting nidus, whereas in a healthy state of the Endometrium, it would be expelled. The most constant sign of Endometritis, in his experience, is that the width of the uterus is increased. The majority of cases are chronic, and in such cases, the curette should be used at once. He thinks that the application of a styptic to the endometrium after curetting is a mistake, as a free discharge is wanted. Purgatives, tonics, and cardiac drugs were, in his experience, often required. The thermocautery was also of use in some cases.

Dr. Alex. Robertson:- was much pleased at the attention given to general treatment. He asked Dr. Pollok if he thought that chronic Endometritis ever caused rheumatoid arthritis. Dr. Crde held this view.

Dr. Robertson's opinion was that such joint affections were due to nervous disturbance. With regard to mental

Meeting XIV (Contd.) mental conditions, in a large number of cases the ovaries were affected.

D<sup>rs</sup> Prokine, Leask, Smith, Halliday, Howie, and Hamilton also took part in the discussion, and D<sup>r</sup> Pollok replied.

Proposal for the  
Ordinary Membership.

George Gordon M.B., and C.P.,  
34 Pollok Street.

was proposed for the Ordinary Membership of  
the Society by D<sup>r</sup> Nichol, seconded by the Secretary.

This was all the business.

David Wouper Pres.



## Meeting XV.

11 Bridge Street, Glasgow.  
13<sup>th</sup> April 1893.

- Chairman. Met the Glasgow Southern Medical Society - the President, Dr Cooper in the Chair. Present Dr J. Brown, A Miller, J. C. Edmiston, T. Forrest, Leask, Cullen, Jenkins, Russell, W. H. Hillan, G. Thomson, J. C. Howie, M. Black, H. Kelly, R. H. Parry & S. Tindal (members).
- Sederunt.
- Minutes approved. J. W. White (visitor) 17 in all. The minutes of last meeting were read and approved of. Dr George Gordon
- Admission of Dr Gordon. was balloted for, and unanimously admitted a member of the Society.
- Motion by Dr Miller. Dr Miller moved that a Committee be appointed, consisting of the President, Treasurer, Secretary, and himself, to make arrangements for the Annual Pic-nic. This was seconded by Dr T. Forrest, and unanimously carried.
- re Pic-nic.
- Demonstration of Cases and Specimens by Mr R. H. Parry. Mr R. H. Parry then gave a demonstration of cases, and specimens. He first shewed a case of talipes valgus with an apparatus applied to correct the deformity by overcoming the action of the peronei muscles, and gave an anatomical demonstration of the parts affected in the deformity. The patient had only been under treatment for a short time, but Mr Parry was hopeful that the beneficial effects of the apparatus would be very marked in a few weeks.
- The next case shewn was that of a boy with talipes equino-varus. Mr Parry had operated on this case with the result that the deformity was greatly reduced.

Meeting XV. (Contd.)

Mr. Parry had removed the Astragalus. He demonstrated the changes which take place in the bone, the result being that the foot is directed inwards, forwards and downwards.

The brain of a case was then shown in which there was a tubercular tumour in the cerebellum.

Mr. Parry had trephined this case below the right lateral sinus. He gave his reasons for localising the tumour, and claimed that this was the first case of the kind where there had been localisation and trephining for a cerebellar tumour.

The last specimens which Mr. Parry showed were parts of bone removed from the knee joint for tubercular osteitis.

The members present examined the specimens shown, and Mr. Parry answered several questions asked. On the motion of the President, Mr. Parry was warmly thanked for his interesting demonstration.

This was all the business.



Meeting XVI.

11 Bridge Street,  
Glasgow, 27<sup>th</sup> April 1893.

Met the Glasgow Southern Medical Society, the Vice-President Dr J. H. Kelly. Present Dr<sup>s</sup> Miller, Howie, Lapraik, Scott, Russell, Leask, W. M<sup>r</sup> Millar, Andrew, J. Thomson, Carr, M. Black, Gordon, Weir, Turnbull Smith, W. Wallace, J. Brown, Hamilton, Alex. Robertson, D. Tindal, D. M<sup>r</sup> Nicol, A. S. Tindal - members. R. Young - visitor. 23 small.

The minutes of last meeting were read and adopted. Dr Alexander Robertson read his paper "On the treatment of some forms of Epilepsy and Epileptoid disorders, chiefly by peripheral agents, with remarks on their modes of action." He said that his paper would be strictly confined to what had been stated on the billet, as the subject of Epilepsy was a very large one.

First, he said, sometimes caused cerebral haemorrhage, and hemiplegia followed on this with resulting epilepsy. The shock produced molecular changes in the nervous system. Cases were quoted illustrative of this.

Some cases of Epilepsy shewed a peculiar want of command over the nervous system, and Dr Robertson gave notes of a case in which he had stopped the fits by command. He directed attention to the use of Morphine in Hystero-Epilepsy,  $\frac{1}{10}$  to  $\frac{1}{6}$  grain stops the fits in five minutes by causing vomiting, and thus taking attention away from the fits.

Meeting XVI (contd). He further quoted cases where the fits had been cured by the patient receiving a shock of some kind.

Lin. Acuit over the part affected often did good.

Local applications of blisters to the scalp over the part of the cortex supposed to be irritated had been beneficial. In treatment Dr Robertson said we must always study the different tendencies, to fits, of the patients.

In some the want of controlling power was not at all great. In such cases Iritate of Amyl had done good.

In conclusion Dr Robertson cited several cases treated by him in hospital and private practice.

During the reading of the paper, Dr Couper arrived and took the Chair.

Dr Couper, Miller, Howie, W. Wallace, Carr, Leask, Russell and Hamilton took part in an interesting discussion which followed, and Dr Robertson replied, thanking the members for the courteous hearing they had extended to him. Dr Miller then gave in the report of the Pic-nic Committee, after Dr Carr had moved and Dr Russell seconded that there be a Pic-nic. The different outings prepared for consideration of the Members by the Committee were freely discussed, and the matter was remitted back to the Committee to make further inquiries and to report at next meeting.

This was all the business.

David Couper Pres.



Meeting xvii

11 Bridge Street, Glasgow.

11<sup>th</sup> May 1893.

Chairman.  
Secretary.

Met the Glasgow Southern Medical Society, the President Dr. Couper in the Chair. Present Dr. Cullen, Carr, Knox, Brown, J. W. Thomson, Gordon, Howie, Erskine, Dr. Murray, J. H. Kelly, W. Dr. Millar, J. G. Wilson, A. Robertson, John Glaister, A. Miller, King, Dr. Nicol, Dr. Black, T. Forrest, J. Hamilton, & A. S. Tindal - members. J. Sutherland - visitor,

Minutes passed.

23 in all. The minutes of last meeting were read & adopted.

Report of Pic-hie Committee.

Dr. Miller gave in the final report of the Pic-hie Committee recommending that the Pic-hie be to Rowardennan on the 8<sup>th</sup> of June. This was unanimously approved of.

Dr. Cullen's Paper.

Dr. Cullen then read a 'Biographical Sketch of William Cullen M.D., Professor of the Practice of Physic in the University of Edinburgh, First Physician to His Majesty the King in Scotland, Author of Nosology, First Lines of the Practice of Physic etc.'

A biographical sketch of

W. Cullen M.D., etc.

W<sup>m</sup> Cullen was born in Hamilton, on the 15<sup>th</sup> April 1710, and was the second son of W<sup>m</sup> Cullen, Writer and Town Clerk of that town. His father also acted as Factor to the Duke of Hamilton, and had a still further source of income in the possession of a farm in Shotts parish, and near the patrimonial property of Bauchs. Dr. Cullen had six brothers, but he and his eldest brother were the only ones who had a professional education. He received his early education in the Grammar School of Hamilton,

Meeting xvii (Contd.)

Dr. Cullen's paper  
continued.

and in one of his school books in the possession of Dr. Cullen, the words, 'I am to be a surgeon' are repeated several times. On leaving the school, he joined the Arts classes in Glasgow University, and at the age of 16 began his medical training by apprenticeship to a well known surgeon of the period, Dr. Paisley of Glasgow. On completing his term with Dr. Paisley, in the end of 1729, he proceeded to London where he immediately instituted a vigorous contest for a ship appointment, then vacant, which he obtained. Then followed an 8 or 9 month's voyage spent on trading between the Spanish settlements in the West Indies. On reaching home, he got an assistantship with an apothecary in extensive practice in London, where he found a congenial opportunity of obtaining a special knowledge of Materia Medica. A relative dying and leaving Cullen some money he retired to a village in Northumberland to devote himself exclusively to study preparatory to settling in practice. Twelve months later, he joined the medical classes at Edinburgh & attended during sessions 1734-35 & 1735-36. In 1736 he settled down to practice in Hamilton, where his success was great and immediate. In 1737 he was elected a magistrate of Hamilton, and was made Provost a year later. Shortly after settling in Hamilton, the meeting between Cullen and W<sup>m</sup> Hunter took place. As a sequel Hunter entered Cullen's house as a pupil, where he remained for three years. In 1744, after seven years practice in



Meeting x-11 (cont.) Hamilton, Cullen removed to Glasgow, and started a course of lectures almost immediately after. The lecturer then sketched Cullen's career up to 1749, when he was elected Professor of Medicine in Glasgow University. In 1755 Cullen removed to Edinburgh, and in 1773 became Professor of Physic on the death of Dr. Gregory. He was elected President of the Royal College of Physicians &c. in August 1773, in which position he did splendid work. On the formation of the Royal Society of Paris, he was elected a foreign associate, and a year later had the honour of F.R.S. (London) conferred on him. Dr. Cullen narrated his distinguished ancestor's life to its close, and increased the interest of his lecture by exhibiting engravings and photographs of Cullen, and his house at <sup>Hamilton</sup> ~~Lanark~~.

Discussion:- Dr. Couper :- thanked Dr. Cullen for his interesting paper. He criticised Cullen's action in going to Edinburgh Medical School when he wished to make Glasgow equally famous. Dr. Glaister :- spoke of Cullen as one of the famous quartette of the time, namely, Cullen, Smellie, and the two Hunters. He quoted from minutes of the Faculty of Physicians and Surgeons, of 1736, in which Cullen's name is mentioned, and gave some interesting extracts of Cullen's admission as a member of Faculty.

Dr. A. Robertson and Breake also spoke, & Dr. Cullen replied.

Dr. Glaister on Death Certification: Dr. Glaister begged leave to bring forward the subject of Death Certification, though no mention was made of it

Meeting 1884 (contd.) it in the billot. This subject had been thoroughly  
Dr. Glaister on discussed by the Society in 1884. He read the  
"Death Certification" conclusions arrived at by the Society at that time,  
and mentioned that he had been summoned as a  
witness to appear before a Committee of the House of  
Commons, at present sitting on that subject. He would like  
that the Society would now re-affirm its former resolutions.

Dr. Miller proposed that the standing orders be suspended.

This was seconded by Dr. Cullen. Dr. Miller then moved  
that we re-affirm the resolutions passed by the Society  
in 1884; this was seconded by Dr. Erskine & agreed to.

Dr. Miller then moved: - That Dr. Glaister be asked  
on behalf of the Glasgow Southern Medical Society to  
lay before the House of Commons Committee now sitting  
on Death Certification, the resolutions passed by the  
Society in 1884, and re-affirmed at the meeting  
held tonight." This was seconded by Dr. Knox,  
and unanimously agreed to.

This was all the business.

David Couper Secy



Meeting XVIII.

11 Bridge Street, Glasgow.

25<sup>th</sup> May 1893.

Met the Glasgow Southern Medical Society, the President  
Dr Couper, in the Chair. Present Dr<sup>s</sup> J. Brown, A. Milroy,  
A. Miller, Dr. Knox, John Glaister, Neil Carmichael, J. C. Howie,  
W. McMillan, John Glaister, J. B. Andrew, G. W. Thomson, J. Halket,  
J. F. Orr, Alexander Munro, J. K. Kelly, R. T. Halliday, C. E. Robertson,  
George Gordon, W<sup>m</sup> Wair, Leach, T. Richmond, Stuart Cairne,  
C. W. Stewart, Mr Nicol and A. S. Tindal - members. J. Sutherland,  
Young, Cunningham, Rev. Dr. Somerville of Rajaputana - visitors -  
29 in all.

The minutes of last meeting were read and approved of.  
Dr Miller, Convener of the Court Medical, moved the  
suspension of the standing orders, that he might bring in  
a case, which had been before the Court Medical. This was  
seconded by Dr C. W. Stewart and agreed to.

The report is as follows:-

11 Bridge Street, Glasgow.

23<sup>rd</sup> May 1893.

Met the Court Medical of the Glasgow Southern Medical  
Society. Present Dr<sup>s</sup> A. Miller, Eben. Duncan, and C. W. Stewart.  
The Convener stated that he had called them together at  
the instance of Dr. Alexander Munro, a member of the  
Society - complaining of the action of Dr. Neil Carmichael,  
another member of the Society - alleging that he had  
committed a breach of professional etiquette, in visiting one

Meeting XVIII (Contd.) one of Dr. Inuro's patients, and of examining and prescribing for such patient - all being against the wish, desire and sanction of the said Dr. Inuro.

The Court having heard the statements of Dr. Inuro, as well as of Dr. Murdoch Cameron, who had been called in consultation by Dr. Inuro, and by the express wish and knowledge of the patient and her friends, and also having heard Dr. Neil Carmichael in his defence, the Court Medical - after having asked some questions at the parties before them, and being satisfied that they had received sufficient and full information which would enable them to come to a decision, closed the evidence in the case. Parties were then removed, after which the Court - Medical deliberated in private, and came to the following conclusions viz:-

- 1<sup>st</sup> The Court-Medical unanimously are of opinion that the friends of this patient were principally to blame, not having acted fairly either by Dr. Inuro or Dr. Carmichael.
- 2<sup>nd</sup> The Court also believe that Dr. Carmichael acted in perfectly good faith in consenting to meet Dr. Inuro, but also think that it would have been better if Dr. Carmichael had communicated directly with Dr. Inuro, to have ascertained whether he was able and willing to meet Dr. Carmichael at the hour mentioned. Further, the Court-Medical are of opinion that Dr. Carmichael did not act wisely, either in examining the patient, or



Meeting XVIII (Contd.)

or in making remarks on the treatment (in the absence of Dr. Innes the ordinary medical attendant) in the knowledge that Dr. Innes and Dr. Murdoch Cameron had had a consultation upon the same patient less than three hours previous to his own visit. The Court Medical think that the proper course for Dr. Carmichael to have taken would have been to withdraw from the case at this point.

Believing however that Dr. Carmichael acted in good faith, and that it was merely an error of judgment on his part, though the Court Medical consider that Dr. Innes had just ground for complaint - they do not consider the case to be one demanding of censure, but recommend that in future when a medical man is called in consultation, under similar circumstances, to see the patient of another practitioner, he should communicate directly with the ordinary medical attendant, and further that, except in cases of urgency, he should neither examine nor prescribe for the patient in his absence.

(Signed) Alex. Miller (Convener).

Rben. Duncan.

C. W. Stewart.

Dr. Carmichael appealed to the Society from the decision of the Court Medical on the ground that the Court was not in possession of all the facts relative to the case. The Secretary was instructed to call a special meeting of the Society to

Meeting XVIII (Contd.) to dispose of the appeal on June 1<sup>st</sup> on the motion of Dr. Glaister seconded by Dr. Knox.

Dr. Knox then showed the following specimens:-

- (1) Abscess in lower end of Tibia. (2) Ankylosis of Tibia, Astragalus and Os Calcis due to Tubercular Disease.
- (3) Sac of Scrotal Hernia. (4) Paroma of Head of Tibia.
- (5) Pyonephrosis due to calculus. (6) Pyonephrosis (Tubercular).
- (7) Destruction of the bodies of the 1<sup>st</sup> and 2<sup>nd</sup> Dorsal Vertebrae, due to tubercular disease. In this case death was due to Asphyxia due to pressure of a Retropharyngeal abscess. (8) Comminuted fracture of Tibia - from a railway smash, and the Fibula from the same case.
- (9) Cauliflower Tumour (Epithelioma) from male mamma.
- (10) Patella sutured by Barker's method. (11) Pessary and fragment of Calculus. Pessary was worn for five years, without being removed. It had ulcerated through the vaginal and bladder walls, and part presented in the bladder. The Calculus formed round this as a nucleus.

Dr. Grant Andrew showed:-

- (1) Plaster cast of a supernumerary toe.
- (2) Plaster cast of acquired Talipes Varus.
- (3) Specimen showing Obturator artery rising from the deep Epigastric.

Dr. Stuart Davine showed:-

- (1) Pyosalpinx - Right Tube.
- (2) Pyosalpinx - Left Tube.



- 9) (3) Tubo-Ovarian Cyst - Left side.  
(4) Ovarian Abscess.  
(5) Ovarian Apoplexy.

Dr. J. K. Kelly shewed:-

- (1) Specimen of Tubal Pregnancy, with ovum intact.  
The patient died from haemorrhage.  
(2) Fatty tumour removed from inside of thigh.  
(3) Two Polypi - one from Cervix uteri - the other from Vagina.  
(4) Tumour from Labia - warty in character.  
(5) Common Ovarian Cyst.

Dr. John Glaister shewed:-

- (1) Specimen of Salivary Calculus.  
(2) Two small urinary Calculi.  
(3) Horny excrescences from the face.

Dr. John Brown shewed:- A pregnant uterus. The patient had died from heart disease, undelivered.

- (2) Tortuous and dilated Fallopian Tubes.

Several members made remarks on the specimens, and the meeting was concluded by Dr. Couper proposing a vote of thanks to the speakers.

Meeting xix.

11 Bridge Street, Glasgow.

1<sup>st</sup> June 1873.

Chairman.  
Sederunt.

An extra-ordinary meeting of the Society was held this evening at nine o'clock, The President, Dr. Cooper, in the Chair. Present - Dr. John Brown, A. Miller, C. E. Robertson, Eiskine, J. S. Davie, Thos. Murray, J. H. Glaister, Leask, J. C. Edmiston, Dr. Knox, D. Russell, J. K. Kelly, P. F. Shaw, S. Sloan, C. W. Stewart, J. F. Orr, John Stewart, J. W. Cameron, Wm. Buchanan, C. G. King, D. Macgilvary, J. C. Howie, Alex. Rankin, D. M. Smith, A. Montgomery, G. W. Thomson, J. L. Haven, A. Patterson, Eben Duncan, Alex. Munro, R. Carmichael, T. Forrest, J. Gordon, Dr. Nicol, Wood Smith & A. S. Tindal - 57 in all.

Exhibition of Photos.  
by Dr. Patterson.

Dr. Patterson exhibited his collection of surgical photographs. The President asked anyone present, who was not a member of the Society, to retire, and then called on Dr. Carmichael to make his statement.

Statement of  
Dr. Carmichael in  
the case of  
Carmichael v. Munro.

Dr. Carmichael said he was satisfied that the Court Medical had acted to the best of their judgment, but their conclusions were not justified by facts, and were contrary to such as would have been given by men learned in the ethics of consultations. As to matters of fact, there was no dispute. The facts of the case were then read by Dr. Carmichael. A young lady called on him in the evening. She said she had been sent by a Mr. Turnbull, whose



Meeting <sup>xix</sup> (Cont'd) whose wife had been delivered of twins. One child was  
born naturally one day, the other the following day by  
Dr Carmichael's instruments. Mr Turnbull was now very ill, and the  
statement (cont'd) husband and friends had lost faith in the family  
attendant, Dr Hume. Mr Turnbull thought his wife  
to be dying, and wanted Dr Carmichael to take  
charge of the case, and was quite willing to dismiss  
Dr Hume. Dr Carmichael declined this, but said he  
would meet Dr Hume. He wrote a card to Dr Hume, and  
gave it to the lady. He heard nothing more till he  
called at the house at 12-10 P.M. - the hour fixed. He asked  
for Dr Hume, and was told that Dr Hume refused to  
meet him or any one else. He further learned that  
Dr Hume had brought Dr Murdoch Cameron in  
consultation that forenoon. The gentleman of the house  
did not know Dr Cameron, though it was stated otherwise  
in the report of the Court Medical. Mr Turnbull was so  
anxious about his wife that the evening before he agreed  
that Dr Hume should bring some one to see his wife.  
Dr Carmichael does not justify the man in sending for  
him, but his excuse was that he had so lost confidence  
in Dr Hume, that he was anxious to know if Dr Carmichael  
would take up the case. Dr Carmichael read the rule  
as to Ethics in consultations, and held that Dr Hume's  
declining to meet him was an act of gross injustice.  
Dr Carmichael then asked what was the patient's right

Meeting ~~xxx~~ (cont'd) right as to having a consultation. The man  
was overcome by Dr<sup>s</sup> Cameron and Inmuro, who  
Dr<sup>r</sup> Carmichael's asked him to send word to Dr<sup>r</sup> Carmichael. The  
statement (cont'd). man promised to do so. Dr<sup>r</sup> Inmuro was not at liberty  
to deny Dr<sup>r</sup> Carmichael seeing the patient. In  
the morning Dr<sup>r</sup> Inmuro promised to be back in an  
hour, but did not return for three hours. Dr<sup>r</sup> Carmichael  
went at the time, and waited till five minutes to one.  
Feeling and saying he had done all in his power in  
the way of etiquette, he felt at liberty to see the patient,  
especially on the ground of emergency. He did see her.  
He found her having cream and water, and advised soup.  
In other points, he tried to retain the confidence of  
the people in Dr<sup>r</sup> Inmuro. He was asked if the  
injections were to be continued, and told them not  
to do anything till he saw Dr<sup>r</sup> Inmuro. He drove to  
Dr<sup>r</sup> Inmuro's rooms, and failing to find him there,  
called at his house. As Dr<sup>r</sup> Inmuro was not there, he  
wrote a letter of four pages. He put himself to this  
trouble, notwithstanding the gross impoliteness of  
Dr<sup>r</sup> Inmuro to him. The same night, Mr<sup>r</sup> Turnbull called  
on Dr<sup>r</sup> Carmichael and told him that Dr<sup>r</sup> Inmuro was  
exceedingly angry. He asked the gentleman to tell  
Dr<sup>r</sup> Inmuro that he (Dr<sup>r</sup> Carmichael) was prepared to  
meet him at any time. Dr<sup>r</sup> Inmuro declined to have  
any other person see the case with him.



Meeting & ix (Contd). Dr. Munro got his fee, and managed to slip out of a bad case. Dr. Carmichael invited questions, and in Dr. Carmichael's conclusion took exception to the following points in the decision of the Court Medical (1) Dr. Cameron was not called in at the special wish of the friends, though they wished someone. (2) Exception was taken to his sending the card by the lady. This is a common method. Whether was the lady or the postman to give it? It could not go direct, unless he took it himself. Then as to stopping, and refraining from seeing the patient, he asked would anyone do so?

Questions. Dr. C.E. Robertson asked if Dr. Carmichael objected to the whole deliverance of the Court Medical? Dr. Carmichael said he wanted to ask the deliverance of the Society.

Dr. Steven asked if Dr. Carmichael had fixed the hour of consultation? Dr. Carmichael - Yes. Dr. Steven - Without knowing if it would suit Dr. Munro? Dr. Carmichael - Dr. Munro's refusal was absolute.

Dr. Munro's statement. Dr. Munro then made his statement. He asked for a consultation, and fixed on Dr. J. Cameron. He narrated the facts of the consultation. He was asked to go to his surgery to make up the required medicine. As Dr. Cameron and he were about to leave the house, he was asked when he would be back - and the husband further asked him if he could not come back by 12.30 P.M. as

Meeting xix (Contd). as Dr. Carmichael was coming then. This was the first he heard of Dr. Carmichael being called, and in such circumstances he refused, after having had Dr. Cameron in consultation. The husband told Dr. Inmuro that Dr. Carmichael was coming in connection with assurance work. Dr. Cameron told the husband to send word to Dr. Carmichael not to come. The man promised to do so. Dr. Inmuro was detained at his surgery, and did not get back till one o'clock. He was asked if he had seen Dr. Carmichael, and he answered in the negative. Dr. Inmuro was then told that Dr. Carmichael had ordered foul. Further, the nurse informed him that Dr. Carmichael had said that the solution was too weak, which was being used for injection. Dr. Inmuro asked the nurse to tell Dr. Carmichael to mind his own business. Dr. Inmuro read the letter from Dr. Carmichael with suggestions. He (Dr. Inmuro) went back at night, and told the gentleman of the house that he had received a letter from Dr. Carmichael. On Dr. Inmuro visiting next day, he found that the pulse was very weak, and, on enquiring at the nurse, found that the patient had had no stimulant since the day before, as Dr. Carmichael had countermanded it. Dr. Inmuro asked the husband to speak, so that they might come to a proper understanding about the treatment of the case.

Dr. Inmuro's Statement.

(Continued.)



Meeting ~~xix~~ (Contd.) Dr. Munro then pointed out (1) that no consultation had been arranged between Dr. Carmichael and himself (2) and that Dr. Carmichael had ordered stronger solution - soup - and prohibited Stimulant.

Dr. Munro's Statement.  
(concluded).

Questions.

Dr. Miller asked if Dr. Munro heard from Dr. Carmichael the night before by receiving the card.

Dr. Munro did not receive the card.

Dr. Leask asked if Dr. Munro intended to meet Dr. Carmichael.

Dr. Munro said no, but afterwards said he intended to be there to see what was done.

Dr. Carmichael and Munro then withdrew.

Discussion  
of the case.

Dr. Patterson thought that Dr. Carmichael should have made a definite arrangement with Dr. Munro as to a suitable time.

Dr. Duncan supported the decision of the Court Medical. Dr. J. L. Stevens spoke in favour of the Court Medical being such a body as to give an authoritative decision, and moved the adoption of the report. This was seconded by Dr. McKim.

Dr. Sam. Sloan would like the first part of the last sentence, in the report of the Court Medical, retained, but would like the part regarding "want of judgment" deleted; and would add "find that Dr. Munro had just cause for complaint, but feel that Dr. Carmichael acted in good faith."

Dr. Robertson would omit the word "censure," and alter the last sentence.

Meeting NIX. (Contd.) Dr. Knox :- felt inclined to agree with Dr. Robertson.

After some discussion in which Dr. Duncan & Steven took part, Dr. Knox moved an amendment as follows:-

Amendment by Dr. Knox. "That the Society depart from the finding of the Court Medical on the ground that the difficulty has arisen through a series of misunderstandings on both sides, to which the friends of the patient materially contributed, and further are of opinion that Dr. Carmichael did not give sufficient time to arrange a consultation with Dr. Innes."

This was seconded by Dr. C.E. Robertson.

Division. The Society then divided when the amendment was carried by 17, to 11 for the motion.

Motion by Dr. Duncan. Dr. Duncan moved that Dr. Carmichael be asked to tender an apology to Dr. Innes for not giving him sufficient time to arrange a consultation. This was seconded by Dr. Buchanan, and carried unanimously.

Motion by Dr. Robertson. Dr. Robertson moved that Dr. Innes apologise to Dr. Carmichael. This was seconded by Dr. Edmiston.

The President ruled Dr. Robertson's motion out of order.

Rider by Dr. Robertson. Dr. Robertson then moved that a rider be added "that Dr. Innes has also been in error in refusing to meet Dr. Carmichael, and that this fact be recorded in the report."

This was seconded by Dr. Leach.

Amendment by Dr. Brown. Dr. Brown moved as an amendment "that Dr. Innes did right in not meeting Dr. Carmichael."



Meeting ~~xix~~ (concluded). This was seconded by Dr. Russell.

Division.

The voting being 10 to 10, the President gave his vote in favour of the previous question.

Dr. Carmichael and Innes were then called in;

Decision of Society

read to Dr. Carmichael and Innes and were asked if they acquiesced in that finding.

Dr. Innes was perfectly satisfied with the decision.

Objection by

Dr. Carmichael.

Dr. Carmichael said that as the objection was <sup>not</sup> ~~one~~ as to time, but absolutely, he could not acquiesce.

He would willingly have made an appointment if Dr. Innes had asked it. He therefore could not apologise, and regretted very much to have to tender his resignation as a member of the Glasgow Southern Medical Society. Several members urged Dr. Carmichael to withhold his resignation meantime, and ultimately Dr. Carmichael did so, it being agreed that he should communicate with the Secretary later on.

Meeting xx.

Rowardennan Hotel.

15<sup>th</sup> June 1893.

The Annual Picnic of the Society was held to Rowardennan on Thursday 15<sup>th</sup> June 1893.

The company, consisting of Dr<sup>s</sup> Couper, Kelly, Knox, Jenkins, Brown, T. Forrest, Hutley, Rankin, Macgilvary, Wright, Marshall, W. In<sup>g</sup>hillan, Russell, Miller, D. Tindal, Carr, Robertson and A.S. Tindal members - and Dr<sup>s</sup> Campbell, Reid and Nichol non-members, left Queen Street for Balloch by 11-5 A.M. train.

Steamer was taken from Balloch to Rowardennan where the company arrived at 1 P.M. At Rowardennan Dr<sup>s</sup> James and Alex. Dunlop the company.

Dinner was served in the hotel at 4 P.M. Dr<sup>s</sup> Couper occupied the chair, and Dr<sup>s</sup> J. K. Kelly acted as croupier. The only toasts were the loyal and patriotic ones given from the Chair, and the toast of the Society given by the croupier.

The return journey was commenced at 5-25 P.M. and town was reached at 8 o'clock, a very enjoyable day having been spent.



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Meeting I (cont.).

Court Medical. Dr. Cooper (Gowans), Pollak,  
Miller, Richmond, Duncan.

Extraordinary members of Council — Dr. Carr,  
C. E. Robertson, W. McMillan.

Governor of Victoria Infirmary. Dr. E. McMillan.

Devises  
Committee.

A Committee composed of the President, Treasurer,  
Secretary, Dr. Miller & Cooper was appointed to make  
arrangements for the Annual Devises of the Society to  
be held on the 19th Oct.

Notice of Motion  
by Dr. A. S. Tindal.

Dr. A. S. Tindal gave notice of the following motion:—  
'That in future the Secretary receive an annual  
honorarium of Five Guineas.'

Dr. A. S. Tindal asked for information with reference to  
the case of Messrs. V. Carmichael, but the matter was  
referred to the Council.

Dr. Prof. Kelly brought under the notice of the Society  
the action of the Pharmaceutical Society in raising action  
against unqualified dispensers of medical men.

Dr. J. Hamilton moved that a special meeting be held  
to discuss the question. Dr. Edmonstone seconded.

The previous question was moved by Dr. J. Brown, &  
seconded by Dr. Halliday, but the motion was carried.

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meeting summoned for the A. cont.

\*

This concluded the business.

\*

D. J. K. Kelly gave notice of the following motion: -

"That any member may be chosen as governor of the Victoria Lyceum; but if same member be elected for three successive years, he shall not be eligible for at least two years."



Meeting II.

11 Bridge Street

Thurs. 12 Oct. 1893.

Extraordinary  
General  
Meeting of the  
Society -

Met the Glasgow Lullern Medical Society.

Reasons for  
calling it.

At the request of Dr. Hugh Kelly, Edinburgh, & Robertson,  
an extraordinary general meeting of the Society was  
held on the 12<sup>th</sup> inst, the President, S. J. K. Kelly, in the  
chair, "to consider the action of the Pharmaceutical  
Society in prosecuting unqualified dispensers in the  
employment of medical men, such prosecutions  
taking place with reference to the sale of poisons."

Pharmaceutical  
prosecutions.

Present.

Dr. J. K. Kelly, Cooper, A. S. Tindal, J. Hamilton, J. Stewart,  
Wright, James Orr, J. Marshall, W. W. Mullen, Chas. Stewart,  
J. W. White, Macgilveray, S. P. Clark, Th. Forrest, Lafrank, C. E.  
Robertson, Leask, J. G. Wilson, Horrie, Richmond, Geo. Thomson,  
Mr. Black, Halliday, J. Russell, R. D. Taylor, Kennedy,  
Rankine, McNeill, John Brown, H. Kelly, Edinburgh,  
Service, Jenkins.

Dr. Hugh Kelly, having called upon the President  
to introduce the subject, stated that his unqualified  
dispensers had been summoned at the instance of the  
Pharmaceutical Society for infringement of the Pharmacy  
Acts, in so far as these relate to the sale of poisons. He

Meeting II (Contd) agreed that medical men have the right of employing unqualified dispensers, & invited the Society to take such steps as were necessary to preserve that right. +

S. J. W. White referred at some length to the legal aspect of the question, & the action of the Pharmaceutical Society in recent years. He maintained that medical men are specially exempted from the operation of those sections of the Acts under which the present prosecutions are instituted, & that medical men are entitled to employ unqualified assistants.

S. C. E. Robertson moved

S. Robertson's  
Motion.

"That as these prosecutions directly affect the recognized interests of the members of the Glasgow Southern Medical Society, this Society determines to support those prosecuted, & appoints a Committee to take such steps as may be necessary in their defence, & to collect voluntary subscriptions from the members & others for that purpose."

The Motion was seconded by Dr. Cooper; & supported by Dr. Ewenston & Mr. Gillray, the former suggesting that an Agent be employed to debate the case before the Sheriff, from whose decision, if adverse, an appeal might be made.

S. Marshall's  
Motion.

S. George Marshall moved "that a Committee be appointed to enquire into the present prosecutions against members of this Society, & if necessary, to take advice of Eminent Counsel, with a view to protecting the interests of members of the Society."



Meeting II (Cont.)

D.C.E. Bennett Seconded.

S. Halliday then proposed the following Amendment:-

Amendment.

"That it is inadvisable that this Society take any action with regard to the present Pharmaceutical prosecutions."

S. Lafrank seconded, said that if medical men enter into competition with chemists & druggists they must be amenable to the Pharmacy Acts. For his own part, he objected to his prescriptions being dispensed by unqualified persons. He was willing that Council's opinion be obtained, but not by the Society as such.

The President: As regards the sale of poisons we are on the same level as chemists. If there cannot employ unqualified persons neither can the medical profession. He has no objection to the ascertainment of Council's opinion.

S. Forrest's  
Rides to original  
motion.

S. J. Forrest wished to add as a rider to S. Robertson's motion "That this Society, whether as a Society or as individuals, should not alone of themselves take the steps implied in S. Robertson's motion but go further, seek other Societies & bodies in London to join with them."

S. Hamilton, Russell, & Filmer, & others took part in the discussion.

Meeting II (Cont.)

A vote was then taken between D. Halliday's Amendment  
and S. Robertson's original motion, whereupon

Voting.

Six voted for the Amendment

Twent nine for the Motion, which was declared carried.

D. Marshall's  
Motion withdrawn:  
S. Forster's Rides  
accepted.

On D. Marshall agreeing to withdraw his motion, S.  
Robertson presented back D. Forster's rides to his  
original motion.

Appointment  
of Committee.

The next business was the appointment of a Committee.  
After several proposals it was agreed that it should consist  
of five members, & the following nominations were made:—  
S. C. S. Robertson, J. Hamilton, W. J. J. J. J., J. J. J., &  
Edwinston.

S. Service gave notice of the following motion—

"That Ten Pounds be given to the Committee appointed  
to protect the interests of those now charged with  
administration of the Pharmacy Act."

This was all the business.

K Kelly.





In preparing "Our Society" the President gave a brief retrospect of its early struggles & vicissitudes, & emphasized the social as opposed to the rigidly scientific element which had characterized the meetings of the Society from the first. The toast was received with enthusiasm.

D. John Brown then proposed the University & Medical Schools. Prof. Wm. Call Henderson replied for the University, D. W. Reid for Anderson Medical College, & D. H. Robertson for St. Mary's.

"Kindred Societies" were proposed by D. Carr, & replied to by D. Deane on behalf of the Clinical & Pathological Society, & D. McVail for the Medico-Surgical, & D. Miller for the Obstetrical & Gynecological Society.

D. Carper proposed "Our guests". D. Johnston, Robinson, replied.

The "Youngest Member" was treated by D. McMillan, & responded to by D. Cullen.

"The ladies" were proposed by the President, D. Forrest replying.

The following gentlemen sustained the harmony of the evening by their musical talents:— D. A. D. Kelly, W. McMillan, J. H. Deane, J. Forrest.

The following were nominated for ordinary membership:—  
D. W. L. Reid: proposed by D. Carper: seconded by D. McMillan.  
W. John Paterson: " " D. McMillan. " " A. D. Kelly.  
W. James H. McGill: " " W. McMillan. " " J. H. Deane.



Meeting III (Cont'd) / Prof. R. T. Kent. Proposed by S. J. Kelly: seconded by S. A. Miller.

Mr. Charles Livingston	..	..	Ed Duncan	..	..	Thos. Jenkins
John H. Carolan	..	..	A. S. Tindal	..	..	Davidson
John Edgar	..	..	S. J. Kelly	..	..	Jenkins
R. M. Buchanan	..	..	Leask	..	..	Jenkins
S. A. Johnston	..	..	Miller	..	..	A. S. Tindal
Mr. W. White	..	..	A. S. Tindal	..	..	D. Tindal
W. S. Kee	..	..	John Brown	..	..	Miller

On the motion of S. A. Miller a hearty vote of thanks  
was awarded the Chairman.

J. K. Kelly.

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## Meeting IV.

11 Bridge St.

Prospers. 2: Nov. 1893.

Met the Prosper Southern Medical Society.

The President, D. J. Kelly, in the Chair.

### Present.

D<sup>r</sup>. Cooper, Miller, J. K. Kelly, McMillan, Halliday, Lapraik, Richmond, J. V. Wallace, Hamilton, Duncan, Russell, Morris, Rankin, McMillan, Robertson, Wakeman, Andrew, Kelly, A. J. Tisdal, J. Brown, Carr, Edmister, Thomson, W. Wallace, Eschen, M. Black, D. J. Hochstetler, Jenkins.

### Minutes of previous meetings.

The minutes of the previous meetings were read & approved of.

### Election of New Members.

D. A. Miller moved that the standing orders be despatched & that the following gentlemen who had been duly nominated for membership, viz., Professors Kent, D<sup>r</sup>. W. L. Reid & Johnston, Prof. Patterson, Meill, Spruington, Caslow, Edger, Buchanan, White, McKee - be elected members of the Society.

This was unanimously agreed to.

### D. A. Munn resigns membership.

The Secretary read a letter from D. A. Munn intimating resignation of membership, with reasons therefor: *inter alia*, that, it having been resolved at a meeting of Council held on 21<sup>st</sup> September last to bring the case of Munn before the Society at its first meeting, such had not been done.

The President pointed out that D. Munn was under a misapprehension, & emphasized the fact that the Council had in no



Meeting IV (Cont)

way pledged itself to the alleged line of action. It remained with the Society to decide whether S. Munroe's resignation be accepted, or whether some other course be adopted.

The Society agreed to the motion of S. Hamilton, seconded by P. Russell, that S. Munroe be asked to reconsider his position; the Secretary was instructed to write S. Munroe to that effect.

S. H. Tindal  
withdrews  
motion.

S. H. Tindal intimated that he wished to withdraw the motion standing in his name.

President's  
motion,  
regarding  
election of  
representatives  
to Victoria  
Infermary.

The President then introduced the motion of which he had given notice, viz., "That any member may be chosen as Governor of the Victoria Infermary; but if same member be elected for three successive years he shall not be eligible for at least Ten Years."

S. C. E. Robertson seconded.

Amendments (1)

S. John Brown moved the previous question, S. J. Hamilton seconded.

(2) S. Eiskine proposed 'That the retiring President be annually appointed to represent the Society on the Board of the Victoria Infermary'. S. W. Wallace seconded.

Aug 3. 94.

Meeting IV (Cont.)

D. E. Duncan regarded the reason for the proposed change as inadequate. No member could be appointed for after the term post unless his special fitness for that post was recognized & appreciated by the Society. All the posts of the Society were allocated yearly yet was in the power of the Society at any time to change its representative. There was no reason why the Society should be deprived of the services of a tried member of the Society for the space of ten years. He, therefore, supported D. Brown's amendment.

S. J. Hamilton spoke to a similar effect.

Voting.

A vote was first taken between the two amendments, viz D. Brown's & D. Lushin's. None voted for the latter. Nominations for the former.

The vote was then taken between D. Brown's amendment & the President's motion, whereupon

Twenty five voted for the Amendment

Seven, for the Motion.

The Amendment was therefore declared carried.

D. Service's  
Motion.

D. Service then moved, in terms of notice, "That the sum of Ten pounds be given to the Committee appointed to protect the interests of those now charged with infringement of the Pharmacy Acts."

D. J. Russell seconded.



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Meeting 22 (Cont)

Discussion  
on D. Lawrence's  
motion.

D. Lapraik questioned the legality of the proceedings involved in the motion, maintaining, first, that the motion should have appeared & been discussed at the previous meeting when it was determined that no separate action should be taken; & secondly, that the Society had not power to apply its funds in the way suggested.

The President, however, ruled that the motion was in order, & that it was in the power of the Society to deal with its funds as it thought fit.

Amendment.

Thereupon, D. Lapraik moved the previous question, & D. J. Brown seconded.

D. J. Hamilton supported the Motion, & intimated that expense had already been incurred by the Committee appointed by the Society.

D. A. Miller asked if the amount involved in the primary action had been guaranteed. This was answered in the affirmative. He then moved "that discussion of the motion be postponed to this day four weeks."

Mr. Lapraik & Brown objected to this; & D. Duncan supported it on the ground that nothing definite was known as to what extent the Society might become liable.

D. E. McMillan thought that the expenses should be raised by voluntary subscription.

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Meeting II (cont)

S. P. Workman, Rankin, Halliday, Richmond, others  
took part in the discussion.

On a vote being taken,

Fifteen voted for the Amendment

Discussion  
on Motion  
postponed.

Fourteen for the Motion.

The Amendment was therefore declared carried, & the  
discussion postponed for a month.

S. A. Miller moved that owing to the lateness of the hour  
the President be asked to deliver his address at the next  
meeting: S. Duncan suggesting that it then take  
precedence of all other business.

This was unanimously agreed to.

S. Miller's  
Motion on  
celebration  
of Jubilee of  
Society.

S. Miller gave notice of the following motion: —

"That it be committed to the Council to take into  
it's early consideration how best it can worthily  
celebrate the forthcoming Jubilee of the Society  
in March next: & to report to an early  
meeting of the Society."

Nomination  
of new members.

The following gentlemen were nominated for membership: —  
W. Robert Clarke, Thetford, proposed by C. E. Robertson Esq. D.

Seconded by D. Baird Esq. D.

James A. Milken Esq. D.; proposed by S. H. S. Tindal

Seconded by J. Ernest Esq. D.



Meeting II (cont.) Alex. F. Reid L.F.P.S.G. proposed by S. Magillan R.D.  
Seconded by J. Hamilton R.D.

This was all the business.

J.K. Kelly

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## Meeting II.

11 Bridge Street

Glasgow. 16. Nov. 1893.

Met the Glasgow Southern Medical Society.

Chairman.

The President. D. J. K. Kelly. in the Chair.

Secretary.

D<sup>r</sup>. Miller, Carr, J. Brown, Edmiston, W. L. Reid, Symington, Hamilton, J. K. Kelly, M. Black, W. McMillan, Macgillivray, M. Nicol, Rankin, Horrie, Nicoll, J. Forrest, Jenkins.

The Minutes of the previous meeting were read & approved of.

President's  
Introductory  
Address.

The President then delivered his introductory address which took the form of some general considerations on Medical Practice after twenty years' experience.

Reference was made at the outset to the difficulty experienced by the young practitioner in reconciling his duty as a physician with his struggle for existence; & how this difficulty constantly tends to become part of the operation of forces acting on the profession both from within & from without: — the development of specialism, the multiplication of hospitals & public dispensaries, & the increasing favour with which these are regarded by a public, which, but a few years ago, shunned them, legislative interference as in the instance of Infectious diseases, &c — all tending to restrict the sphere of the general practitioner, & to create a spirit of competition which ought to be alien to the profession.

The



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Meeting II (cont.)

Presidential  
Address:

The Municipalization  
of the Medical  
Profession.

The President then dwelt upon the relation of the medical Practitioner to the Community, & the conditions under which the Science part of medicine might become more effective.

\* Disease being now regarded as of national import, the Physician is virtually a public official. The recent institution of Medical Officers of Health is a partial recognition of this; & suggests the possibility of a wider extension of the principle involved, for which the old parochial system seems to furnish a less satisfactory basis. Each district would then have its medical officer who would be responsible for the general health of his district. To groups of districts, Hospitals & Consultants would be attached. By some such system both Humanity & Science would profit: the laws of the occurrence and distribution of disease would come to be placed on a scientific basis: & on the other hand, it would be impossible for anyone, however poor, to be deprived of medical aid.

Some of the objections to this municipalization of the medical profession were passed in review & combated. To the President it seemed that the rapid development of Socialistic, as opposed to individualistic, principles, in other departments of life, combined some such scheme as he had depicted, not altogether incapable of realization.

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Meeting II (cont.)

Meanwhile, the harmony between members of the profession, which is so desirable in their own & the public interest, might be promoted by developing all the possibilities for good which are latent in societies such as ours own.

On the motion of D. A. Muller a hearty vote of thanks was awarded to the President for his interesting address.

Resignation  
of D. A. Muller.

The Secretary then read a letter which had been received from D. A. Muller reaffirming his resignation, which the Society resolved to accept.

D. A. Muller's  
motion -  
Jubilee  
Celebration.

D. A. Muller then moved in terms of notice,

"That it be submitted to the Council to take into its early consideration how best it can worthily celebrate the forthcoming Jubilee of the Society in March next: its effort to an early meeting of the Society."

This was seconded by D. J. Forrest, unanimously agreed to.

Election of  
New Members.

The following gentlemen were elected members of the Society: -  
D. Clarke, Northampton; D. James A. Hicken, & D. Alexander F. Reid, Glasgow.

This was all the business.

J. Kelly



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Meeting II.

11 Bridge Street.

Glasgow. 30. November 1893.

Met the Glasgow Southern Medical Society.

The President, D. J. Kelly, in the Chair.

Present: D. J. Kelly, Miller, W. H. Millan, Doyall, J. W. Allan, Chas. Thomson, Steuart, J. W. White, Rankin, Hamilton, J. K. Munro, Springston, Montgomery, J. Stewart, J. C. G. Smith, Culver, Black, Gordon, Horrie, D. McCrene, Lafrank, Erskine, C. S. Robertson, Russell, Halliday, J. Brown, Mayjiboy, Reid, E. H. Millan, Christie, H. Kelly, Marshall, Jenkins.

The Minutes of the previous meeting were read & approved of.

Election of  
New Members.

D. A. Miller <sup>having</sup> moved the suspension of the standing orders proposed that D. James W. Allan be elected a member of the Society. The proposal met with unopposed assent.

D. Robertson's  
Paper.

D. John Brown, for D. Alexander Robertson who was absent through illness, read a paper entitled 'Case of marked improvement in General Paralysis, with remarks on treatment'.

In the case recorded, decided improvement followed the establishment of a number of issues on the

Meeting in (Contd.)

Scalp over the motor area. The novelty of the treatment lay in the establishment of distribution of continuous or prolonged counter irritation over the primary seat of the disease.

The author being absent, no discussion followed the reading of the paper.

Election of  
Seal-Keepers.

The Secretary moved 'That S. H. T. Tindal be appointed Seal-keeper vice S. A. Munnis resigned'

S. H. Gilroy seconded, & the Society unanimously agreed to appoint S. Tindal.

Donation  
from S. Eskinis.

S. Eskinis intimated that the Seal was in the possession of S. Munnis, & took occasion to present a Seal of the Seal to the Society. He also gave notice of the following motion:-

S. Eskinis's  
Motion about  
Seal.

'That the Society mark its Jubilee by passing a New Seal to be struck: to provide the same out of the funds of the Society.'

On the motion of S. Hamilton, a vote of thanks was awarded to S. Eskinis for his donation.

Adjourned  
Discussion  
on S. Services  
Motion -

The adjourned discussion on S. Services Motion was then resumed.

Report of  
Committee.

S. J. Hamilton gave a report of the work done by the Committee. Notice of appeal had been intimated in order to obtain a final decision, & to know the exact position of medical men. Liability had already been incurred to the



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Meeting VI (Cont.)

Extent of Ten Pounds. The expenses of the appeal would amount to about Fifty Pounds.

In reply to D. Lapraik, he informed the Society that the Committee had approached the Medico-Chirurgical Society with the view of securing the cooperation of that body: but the Council of the Society had adjudged the matter outside their province.

D. Rankine's  
Amendment.

D. Rankine proposed as an Amendment

\* 'That the Society grant Twenty pounds to the Committee, on condition that it be repaided to the Society should the voluntary subscriptions fail to meet the expenses.'

D. C. E. Robertson seconded.

Considerable discussion followed in which D. Drygall, Marshall, R. Forrest, E. M. Millan, W. White, Cullen, Edmiston, Macgillivray, & others took part.

Result of  
Voting.

On a vote being taken

a) between the amendments, -

21 Voted for D. Rankine's amendment.

17 " " D. Lapraik's " "

b) between the Motion & D. Rankine's amendment,

20 Voted for the amendment,

7 " " Motion.

D. Rankine's amendment was therefore declared carried.

D. Lapraik's  
Protest -

D. Lapraik formally lodged a protest anchored in the  
following terms: -

\* 'That it is illegal to spend the funds of the Society  
in terms of the amendment.' \*

and this was signed by

Signatories -

Thomas Lapraik.

John Doyall.

R. J. Halliday.

John Brown.

William Cullen.

W. H. Mullan.

Alexander Miller.

Edward H. Mullan.

Th. W. Jenkins.

This was all the business.

J. H. Kelly



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Meeting VII.

11 Bridge Street

Glasgow. Th. Dec. 1893.

Met the Glasgow Southern Medical Society.

Chairman.

The President, D. J. Kelly, in the Chair.

Ladies absent.

D<sup>r</sup>. R. J. Halliday, J. W. Allan, D. Firdal, J. W. Thomson,  
J. C. Morris, E. W. Allan, J. Lefevre, M. Black, A. Jamphlet,  
J. J. Smith, C. Spence, A. Miller, J. Forrest, J. C. Stewart,  
Edmund, J. E. Smith, C. McKing, C. E. Robertson, D. Macpherson,  
D. Macdonald, D. S. Firdal, J. Russell, W. Allan, J. K. Kelly,  
J. G. Smith. L. G. Stevens, Visitors.

Election of  
New Members.

The minutes of the previous meeting were read & approved of.  
Mr. R. Scott Fenn, Mr. D. Victoria Suprenant, & Mr. J. M. Stirling with  
Mr. D., Northdale Road, were elected ordinary members of the  
Society.

D. J. W. Allan  
on  
Haemorrhage in  
Euteric Fever.

D. James W. Allan then read a paper on 'Haemorrhage  
in Euteric Fever'.

The occurrence of haemorrhage in Euteric Fever was, in  
D. Allan's experience, 'a cause for anxiety & some  
demanding careful & immediate attention'. Assuming  
that the blood comes from ulcerated Peyer's Patches -  
other sources must be excluded - its appearance in the  
stools is often preceded by certain warning signs, e.g.,

- a) A constant, apparently meaningless, volleys was.
- b) A fall in temperature.
- c) A soft, quick pulse, fall of the lips, sighing respiration.
- d) A curious smell, suggestive of fresh earth, & raw beef.

After a brief description of the varying appearance of the motions containing blood, Dr. Allan dealt with the therapeutic indications - placing in the front rank Absolute Rest, & the External & Internal Application of Cold. The former is met by careful & judicious nursing: the latter comprises the administration of ice food & drink, the intermittent application of Cold to the surface of the abdomen, preferably by Dr. Robertson's apparatus.

The drugs which experience had led Dr. Allan to consider reliable were Lead & Opium, Turpentine, & Egypt. Of these he greatly preferred the combination of Lead & Opium, in the form of a pill, uncoated, or even broken up into fragments at the time of exhibition to make sure of its action.

Turpentine came next in order of merit. Of Egypt he could not speak with enthusiasm.

Against Colloids, Dr. Allan advocated the use of Claret & Liebig's Extract.

In conclusion Dr. Allan advised that actual as well as impending haemorrhage should be combated by immediate & energetic treatment even in the face of apparent hopelessness.

In the discussion which followed, Dr. Miller Duncan,



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Meeting VII  
(Cont.)

Russell, McMillan, Horie, Thomson, D. Nordal,  
Edmiston, J. K. Kelly, took part.

All agreed in cordially thanking S. Allan for his  
valuable contribution.

D. Eiskjær's  
Motion.

"That a New  
Seal be  
struck to  
commemorate  
Jubilee of  
Society."

D. J. Eiskjær moved in terms of notice.

"That the Society mark its Jubilee by causing  
a new seal to be struck: the same to be  
provided for out of the funds of the Society."

The proposal was seconded (D. E. Duncan, &  
unanimously adopted by the Society. A Committee,  
composed of the President, D. Eiskjær, the Secretary, &  
the Seal-keeper, was appointed to give effect to the  
resolution.

Reports of  
Council:—

a) On Celebration  
of Jubilee.

The President reported to the Society that the Council had  
agreed to recommend that the Celebration of the Jubilee  
of the Society should take the form of a Canvasazjars-  
Dance, & that it should be held in the Rygh Hall, Crd. Ht.

Various suggestions were made by the members present;  
ultimately it was resolved to take a plebiscite of the  
Society to determine which of the undernoted proposals  
recommended itself to the majority of the members:—

- (a) Canvasazjars-Dance, as supra.
- (b) Dinner, with dance following.
- (c) Dinner, confined to members of the Society.

b) On the  
purchase  
of a Safe.

The President further reported that the Council deemed  
it expedient to provide the Secretary with a safe to ensure the  
due preservation of books & documents belonging to the Society.

This was with the unanimous approval of the Society;

Inventory of  
property of  
Society to be  
taken.

on the recommendation of Dr. E. W. Killan it was  
resolved to draw up an inventory of all the property  
belonging to the Society.

Mr. Mayland  
gives notice  
of motion -

The Secretary, for Mr. R. E. Mayland, gave notice of the  
following motion: -

- a) That the Society deems it expedient that  
a 'Home' for the treatment of private  
patients under their own medical  
attendance should be located on  
the South Side of Glasgow.
- b) That the Society petition the Directors  
of the Glasgow Training Home for  
Nurses to provide a branch of that  
institution for the above purpose.

This was all the business.

R. Kelly



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Meeting VIII.

11 Bridge Street

Glasgow. 11. January 1894.

Met the Glasgow Southern Medical Society.

Gairman.

The President, D. J. Kelly, in the Chair.

Secretary.

D. W. Fenwick, R. D. Halliday, A. Hillier, J. W. White,

W. H. Hillman, G. Gordon, R. Pollok, J. C. Horrie, W. Wallace,

J. Russell, J. W. Wallace, D. McCrene, J. Forrester, J. K. Kelly,

J. Hamilton, H. L. G. Leach, J. C. Edwiston, C. E. Robertson,

R. B. Pary, E. Duncan, E. A. Mayland, J. W. Jenkins —

22 in all.

Mr. Mayland's  
Motion, re  
Nursing Home.

The Minutes of the previous meeting having been read and approved of, the President called upon Mr. Mayland to introduce the motion standing in his name.

(a) First  
Clause.

Confining himself to the first clause of the motion, viz. "That the Society deem it expedient that a Home for the treatment of private patients under their own medical attendants should be located on the South Side of Glasgow."

Mr. Mayland asked for an expression of opinion thereupon on the part of the Society. For himself, he believed that the establishment of such an institution would obviate certain disadvantages long experienced by practitioners on the South Side of the City. It would be a Home into which all medical men would have an

Meeting VIII (Cont.) Equal right to <sup>admit</sup> ~~admit~~ patients; it would provide a source from which at all times Nurses could readily be procured.

The motion was seconded by D. Pollok, & supported by D<sup>r</sup> Duncan, Fenwick, Russell, & C. E. Robertson.

S. Barry desired more information as to the nature of the proposed home, & pointed out the danger likely to arise from an indiscriminate admission of cases.

The President asked if the number of patients admitted from the South Side into Existing Homes was tantamount to a demand on the part of the City for another & more accessible home. Further, who was to judge of the suitability of cases?

Mr. Mayland replied that no inference could be drawn from the number of patients residing on the South Side admitted into Existing Homes. The experience of medical men was sufficient to determine if advantage was likely to be taken of a home more accessible to them & their patients.

As to the suitability of cases, we must be guided not by hospital procedure, but by the relative superiority of a Nursing Home to a Private Home.

The first clause of the motion was then accepted by the Society without a division.



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Meeting III. (cont.)

Mr. Mayland now moved

6) Second  
Clause.

"That the Society petition the Directors of the  
Jesuits Training Home for Nurses to  
provide a branch of that institution for  
the above purpose;"

but afterwards at S. Duncan's request, altered the  
tenor of the motion to the following; —

Second  
Clause, as  
amended —

"That the meeting instructed the Secretary  
to communicate with the Directors of  
the Jesuits Training Home for Nurses,  
and ascertain from them if they are  
willing to meet with a deputation of  
the Society to consider the question of  
establishing a branch of their  
institution on the South Side of Glasgow."

This was seconded by S. E. Duncan.

Amendment  
to Second  
Clause of  
Motion.

An amendment to the effect that the discussion be  
postponed for a month was proposed by S. C. E. Robertson  
seconded by S. J. C. Edmister.

In the discussion which followed S. Halliday, Parry,  
Hamilton, Pollak, Bonie, Russell, & J. K. Kelly, took part.

Voting -

The Amendment & Motion being put to the meeting,  
Eight voted for the Amendment,  
Fourteen, for the Motion.

The Motion was, accordingly, declared carried.

Appointment  
of  
Committee.

S. Duncan then moved, & S. H. Miller seconded,  
"That a Committee, composed of the President,  
the Secretary, the Mover (W. Maynard), & the  
Recorder (S. Duncan) of the Motion, be  
appointed to give effect to the resolution".  
This was unanimously agreed to.

The President intimated that S. Parry had kindly  
consented to defer his demonstration of Rural Cases  
to a more convenient time.

This was all the business.

W. Kelly  
-



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Meeting IX.

11 Bridge Street.

Glasgow. 25. January 1894.

Met the Glasgow Southern Medical Society.

The President, D. J. K. Kelly, in the Chair.

Sederunt; - D<sup>r</sup>. John Brown, A. Munnies, D. Tisdal, W. L. Reid, J. W. Thomson,  
H. G. Laack, J. V. Wallace, J. Russell, J. T. Smith, R. Forrest,  
J. H. McGill, J. W. White, J. C. Edmonston, D. Cooper, J. C. Horrie, W. Lewis,  
J. K. Kelly, A. Rankine, C. E. Robertson, G. Gordon, J. Edgar -  
Visitors - D<sup>r</sup>. James Maclean, W. C. Murray, R. H. Young.

Edg. in alt.

The Minutes of the previous meeting were read & approved of.

International  
Medical  
Congress -  
Rome. 1894.

A letter from the Council of the forthcoming International  
Medical Congress was laid upon the table. It was agreed  
that members of the Society who intended to be present  
should send their names to the Secretary, & represent  
the Society - at their own expense.

S. W. L. Reid  
On Frequent &  
Painful  
Micturition, in  
the Female.

S. W. L. Reid introduced a discussion on the  
Causes & Treatment of frequent & painful Micturition in  
the Female.

Reference was first made to the numerous forms of  
disease which lead to interference with the functions of the  
bladder, such as the presence of Syggo, Uvic Acid, Oxalate of  
Uvic in the urine, Vesical Calculi, Gleet, Gonorrhoea,

Pelvic Cellulitis, Bartholin's Gland, pressure of the gravid uterus  
on of pelvic tumours. Illustrative cases were described with the  
appropriate treatment.

The obscure forms of the disorders were then dealt with. Of these Dr. Reid enumerated Frigors of the Arteries & Haemorrhoids; Structure of the Uterus, for the most part consequent upon injudicious treatment of uterine canals; Endometritis Cervicis; Malaria; Hypatid diseases; Renal affections; Malignant diseases of the pelvis; Hysteria. Certain cases with no assignable cause were considered apart.

In the discussion which followed Dr. J. W. White, Neil, Leach,  
D. Kendall, Miller, the President, took part.

D. Meib opened to the diagnostic value of the hystroscope.

S. Loeb suggested ptomaine intoxication as a cause of frequent misdirection of interference with the controlling nerve centres.

The effect of slight prolapse of the uterus was pointed out by S. Hillier, while the President directed attention to the similar action of Prolapse of the Anterior Vaginal Wall and Retroversion uteri.

S. Reid replied, presented the thanks of the Society for his valuable & suggestive paper.



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Meeting II.

11 Bridge St.

Glasgow. 8. February 1894.

Met the Glasgow Southern Medical Society.

Chairman.

The President, S. J. K. Kelly, in the Chair.

Secretary.

Prof. M<sup>r</sup>. Call Anderson, S<sup>r</sup>. J. Messel, Alexander Scott,  
J. Erskine, Mr. Black, W. McMillan, J. A. Arthur,  
Chas. Thomson, W. Carr, A. Miller, John Brown, J. K. Kelly,  
C. S. Robertson, D. McNeil, R. F. Halliday, J. W. Jenkins —  
16 in all.

International  
Medical  
Congress.

The minutes of the previous meeting were read & approved of.  
S. James Erskine intimated that he intended to be present  
at the forthcoming International Medical Congress at Rome.  
The Secretary was instructed to furnish him with  
credentials from the Society.

Professor M<sup>r</sup>. Call  
Anderson, on  
Antipyrin —

Prof. M<sup>r</sup>. Call Anderson read a paper "On Antipyrin  
with special reference to its use in large doses".

Few of the drugs introduced in recent times equalled  
Antipyrin in utility. It had been condemned as dangerous,  
but on insufficient grounds. The conclusions of the recent  
Commission agreed with S. Anderson's experience that it is a  
safe & reliable drug. To ensure safety, the initial dose  
should be small, 10 grains or less.

Antipyrin may be administered by the mouth, by the rectum,

or Hypodermic injection. It is antipyretic, haemostatic, analgesic, & sedative in action.

Uses of  
Antipyrin -

As an Antipyretic, it compares favorably with all other drugs of this class, its action being speedy & prolonged.

As a Haemostatic, it is successfully used in certain cases of Epistaxis, & bleeding Piles.

Its Analgesic action is striking in neuralgic disorders, in Hemisarcia, locomotor ataxia (for the lightening pains), in Nervous Sick Headaches. On the other hand it has no influence on inflammatory affections, & so may be of diagnostic value.

As a Sedative, Antipyrin has proved useful in Insomnia, & has may be associated with Irritability of the bladder; in Spasmodic Hysteria; in Arterial hypertension.

Antipyrin  
in  
Epilepsy  
&  
Chorea.

D. Henderson narrated at length two cases of Epilepsy which yielded to rapidly increasing doses of Antipyrin. In the one 75 grains was finally administered three daily, in the other 50. Similarly, in two cases of Chorea, a cure was effected & the amount administered daily reached 50 & 45 grains respectively.

Discussion -

In the discussion which followed Dr. Scott, Halliday, Hulke, J. Brown, C. E. Robertson & the President took part.

Dr. Scott mentioned a case where the severe pain of Cancer of the Pylorus was relieved by Antipyrin after Morphine had failed. He also instanced a case where the drug was of



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Meeting X (cont.)

diagnostic value of lowering the temperature permitting the return of convulsions.

Discussion  
on  
Antipyrin.

D. Haliday referred to several cases where alarming symptoms had followed the administration of Antipyrin. He had found that drug useful in the hæmorrhage of Delirious Fevers.

D. Halley has found it of use in the hæmorrhage of Chronic Bronchitis, or in Rheumatic Headaches.

Nextly, D. Anderson pointed out that there was no regulation dose of any medicine. The initial dose should always be small. If this means ill effects might be avoided. In the case of Antipyrin, however, for relatively large doses was quickly established.

A vote of thanks was awarded to D. Anderson for his paper.

Meeting of the Seal Committee was afterwards held -  
Mr J. Fishie submitted designs for a new Seal.

This was all the business.

J. K. Kelly.

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Meeting XI.

11 Bridge St.

Thurs. 22<sup>nd</sup> Feb. 1894.

Met the Glasgow Southern Medical Society.

Chairman.

The President S. J. K. Kelly, in the Chair.

Secretary.

M. D. Cooper, J. H. Nicoll, W. Carr, A. L. G. Leach, J. T. Smith,  
D. McCrene, J. C. Morris, W. McNeill, J. Eshen, A. Tindal,  
S. Jordan, D. Tindal, A. Miller, John Brown, J. K. Kelly, D. C. Christie,  
R. T. Halliday, J. Russell, J. W. Jenkins. — 20 in all.

The minutes of the previous meeting were read & approved of.

The President announced that the result of the plebiscite on the mode of celebrating the Jubilee of the Society did not justify further action on the part of the Council.

D. A. Miller moved that the Jubilee be celebrated by a dinner; that the members have the privilege of inviting friends, & that the Council be empowered to issue invitations to a limited number of guests.

S. D. Cooper seconded —

S. J. Eshen moved, & S. Christie seconded, that the invitations be limited to members & professional friends.

S. McNeill moved, & S. Jordan seconded, that



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Meeting IV (cont)

that the Jubilee of the Society be celebrated by  
Convergences, that invitations be issued to  
the members of the profession in the City,  
that the expense be borne by the Society.

On a division <sup>four</sup> ~~the~~ voted for the motion of Dr.  
McNeill, fourteen for that of Dr. Miller —  
In the next division, ten voted for Dr. Robinson,  
ten for Dr. Miller, none. The Chairman gave his  
casting vote in favour of Dr. Miller's, which  
became the ruling motion.

Dr. D. Cooper  
on  
Eruptions of  
the Scalp.

Dr. D. Cooper then showed a case of Ichthyosis  
histrix, proceeded to read a paper 'On Eruptions  
of the Scalp?'

'The chief interesting feature of the case shown was  
the more pronounced character of the lesions on the  
front aspects than, as is usually the case, on the sides.  
Dr. Cooper made a few general remarks on directed the  
line of treatment he proposed adopting.'

'Dr. Cooper afterwards read a short paper on Eruptions  
of the Scalp, making special reference to Seborrhoea  
in its various forms, Alopecia pityriasis, Alopecia areata.  
Favus, Trichotomomycosis, Eczema, Psoriasis, & Impetigo.  
He mentioned the theories at present in vogue relating to these  
diseases, the bearing they had on the recently introduced

thor of inflammation called Chancetree.

In the discussion which followed Dr. Thomson, Horrie,  
Eskewie, McCall, Gordon, D. Tindal, Millar, Brown, & J. K. Kelly,  
took part. D. Cooper replied -

This was all the business.

J. K. Kelly  
—



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Meeting XII.

11 Bridge Street.

Glasgow 8<sup>th</sup> March 1894.

Met the Glasgow Southern Medical Society.

The President, S. J. K. Kelly, in the Chair.

Present.

Mr John Brown, A. Miller, R. T. Halliday, D. Findlay,  
A. J. Findlay, J. C. Horrie, Chas. Thomson, J. Richmond,  
A. Jamphelin, W. Carr, D. Cooper, A. Rankin,  
J. T. Smith, J. Hamilton, G. Gordon, J. Forrest,  
W. M. Millan, J. G. Wilson, J. K. Kelly,  
E. M. Millan, J. W. Jenkins. — 21 in all.

The Minutes of the previous meeting were read & approved of.

S. A. Miller called attention to the death of S. Robert Macpherson, a member of the Society, moved that in consonance with the usual practice the event be recorded in the Minutes, & a letter of condolence be sent to the relatives of the deceased.

This was seconded by S. Carr.

S. James Hamilton moved that the same be done in the case of the late S. Buchanan, of Cathcart.

S. A. Miller seconded.

It was left to the President & Secretary to give effect to these motions.

S. Fullerton  
on certain  
forms of  
Epistaxis.

S. Robert Fullerton then read a paper 'On certain forms of Epistaxis'.

The subject was introduced by a number of illustrative cases, in which, under various conditions, recurrent hæmorrhage proceeded from well defined lesions of the nasal tract. The structure of the parts concerned, the influence of age, sex, employment, & general body health, were carefully considered.

Various methods of arresting the hæmorrhage were described. External pressure was generally of momentary service: anterior plugging almost always sufficient to stop the discharge. Perchloride of Iron was objectionable as it obscured the source of the bleeding. For permanent effect nothing equalled the application of the cautery.

Minor cases might be controlled by the Cocain Spray, & Mouth.

In the discussion which followed S. J. G. Wilson, J. Hamilton, J. Richmond, E. M. Mullen, L. C. Bonie, A. Miller, & D. Rankine took part.

S. J. G. Wilson referred to two cases of Epistaxis. In one severe hæmorrhage preceded hæmoptoe: in the other periodic



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Meeting XII (cont)

Nasal bleeding seemed to replace haematuria. S. James Hamilton found Epistaxis in young people frequently to depend upon constipation. It was also common in the intermenstrual, or in those with vascular degeneration. General oxygia was, in his experience, more frequent than haemorrhage from a defruct area; in such cases anterior plugging was apt to be inefficient.

S. Rankin wished to know if Epistaxis was frequently met with in those suffering from Secondary Syphilis.

In reply. S. Fullerton referred to certain forms of Tertiary Syphilis, with deep ulceration of the Nose or Pharynx, in which Epistaxis was not infrequent. It might also occur in the Secondary stage.

A vote of thanks was awarded S. Fullerton for his paper.

This was all the business.

J. Kelly





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Meeting XIV (Cont.)

meetings, took part in our discussions. His earnestness & ability were early recognized after election as Sec. keeper in 1890: the members at all times listened with respect to his utterances. His early death which occurred on 1<sup>st</sup> March after a long illness most patiently & bravely borne, is a distinct loss not only to the Society but to the medical profession in Glasgow.

Remarks on a  
Case of  
Eclampsia  
during  
pregnancy.

D. Jenkins then read a paper entitled 'Remarks on a Case of Eclampsia during pregnancy.'

The following summary embraces the main facts of the Case: Renal Complications in IV.<sup>th</sup> V.<sup>th</sup> VI.<sup>th</sup> & VII.<sup>th</sup>.

Pregnancies: Parturition premature in IV.<sup>th</sup> & V.<sup>th</sup>.

Endometritis. Death of foetus in 4<sup>th</sup> month of VII.<sup>th</sup> pregnancy, with retention of Ovarum till 6<sup>th</sup> month. Endometritis. Oophoritis.

Eclampsia in 8<sup>th</sup> month of VII.<sup>th</sup> pregnancy: Birth of living child 5 weeks later.

Erythema in puerperio.

The condition of the Placenta at the end of the 7<sup>th</sup> & 8<sup>th</sup> pregnancies received special consideration. In the former, the Placenta was transformed into one large white infarct: in the latter, the placental tissue was unduly soft, containing several white infarcts.

The theory which seemed best to explain the case was that of Fane which regards Placental Infarcts as the result of an Endometritic prothrombus due to a virus which gives access to the placenta during pregnancy. Nephritis & Eclampsia are secondary, & caused by the dragging of the products of bacillary activity.

In the discussion which followed Dr. A. S. Tindal, Dr. Thomson, S. Jordan, O. Tindal, J. Brown, & J. Frost, took part.

S. Thomson referred to a case in which Eclampsia occurred in the course of four successive pregnancies. Albuminuria was always the first sign of the disorder, & the Placenta was in each instance diseased. The fifth attack ended fatally.

This was all the business.

SK Kelly



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Meeting XV.

Ragun Ryge Infirmary.

5. April 1894.

Met the Ragun Southern Medical Society.

Chairman.

The President, D. J. K. Kelly, in the Chair.

Secretary.

D. D. C. McVail, H. Scott, M. Thomas, E. H. Mullan,

E. Duncan, John Brown, J. K. Kelly, J. W. Thomson,

M. Black, J. Hayes Orr, J. Aitken Jr., J. K. Munn,

D. Fendel, Ross, J. C. Howie, J. Aitken Senr.

A. Miller, J. Edgar, C. E. Robertson, J. C. Edmiston,

J. W. Jenkins; D. Patrick (Visitor).

22 in all.

The standing orders were suspended on the motion of D. D. Fendel, seconded by J. W. Thomson, after reading of the minutes of the previous meeting deferred.

Clinical  
Demonstration  
by

D. D. C. McVail

D. D. C. McVail brought under the notice of the Society a number of patients suffering from various diseases of the nervous system.

The first case was that of a boy with Cancer of the Cervical & Dorsal Vertebrae, & almost complete loss of power & sensation, in whom a complete cure as regards nerve conduction had been effected by prolonged rest (15 months). The non-occurrence of bed sores in this, & similar cases in D. McVail's experience, was noted.

The second patient introduced illustrated a form of Occupation Paralysis. The muscles of the left arm, which, as a wire weaver, he chiefly used, were thrown by the right effort, into a condition of spasm. Slight improvement had followed the use of Iodide of Potash, & the Constant Current.

The third case was one of Hemiplegia - preceded by Hemiplegia & Aphasia - without retinal atrophy: probably due to haemorrhage.

Then followed three cases of Locomotor Ataxia, each characterized by the predominance of a different group of symptoms: one case of Ataxic Paraplegia: & a remarkable case of traumatic depression of the skull over the motor brain, with the development after several years, of symptoms akin to those of Locomotor ataxia.

S. M. Vail then made some remarks on the nature of the latter disease & its relation to Peripheral multiple Neuritis. The prognosis was far more so gloomy as usually supposed, decided improvement generally taking place with Rest, Iodide of Potash, & the Constant Current.

In the discussion which followed S. E. Duncan, A. M. Allen, A. Thomas, & the President, took part.

S. E. Duncan advocated the use of Suspension, a mode of treatment which S. M. Vail did not regard with favour.



1893-94.

Meeting XV. (Cont.)

On the motion of the President a hearty vote  
of thanks was awarded to S. M. Vail,  
for his very interesting & instructive  
demonstration.

This was all the business.

J. Kelly

1893-94

Meeting XVI.

11 Bridge Street

Glasgow. 13<sup>th</sup> April 1894.

Met the Glasgow Southern Medical Society.

The President, S. J. K. Kelly, in the Chair.

Present.

D<sup>r</sup> C. Workman, D. Tindal, J. K. Kelly, J. Brown, A. Miller.

A. Robertson, R. J. Halliday, J. W. Jenkins, J. W. Allan,

J. C. Edmiston, J. Russell, G. Gordon, M<sup>r</sup> Cecil.

13 in all —

The minutes of the two previous meetings were read and approved of.

D. C. Workman demonstrated the following specimens: —

Demonstration  
of pathological  
specimens by  
D. C. Workman.

I. Dilated Heart, with fibrinous thrombi in chambers —

without valvular disease. The lungs from the same case contained thrombi. There was no renal disease.

II Tubercular mass in left lobe of Cerebellum, posterior lobe of Cerebrum, with necrosis of petrous portion of corresponding temporal bone, presence in latter of Tubercle Bacillus. The clinical history of the case was characterized by slow pulse, subnormal temperature, free discharging from ear. Fundi oculorum normal.

III Cystitis of liver; two specimens, one from a recent, the other from an earlier case in the Royal Infirmary.



1893-94.

Meeting Nov (Cont.)

Both occurred in children. In the one the spleen was so enlarged as to overshadow the hepatic condition: in the other, it was but slightly affected.

IV. Sarcoma of spinal meninges, almost entirely destroying the Cord. Small nodules here & there in the brain.

D. A. Robertson made some remarks on the Cerebellar & Hepatic Cases. The free discharge from the ear, in the former, was, pain to the onset of meningitis, against the action of Cerebral abscess. The Hepatic Case he thought probably of alcoholic origin —

Vote of thanks was awarded to D. Workman for his interesting demonstration.

The matter of the Annual Picnic which came under consideration was left in the hands of the Council, a report to be made to the Society at the next meeting.

This was all the business.

W. Kelly

1893-94

Meeting XVII.

11 Bridge St.

Glasgow. 3<sup>rd</sup> May 1894.

Met the Glasgow Southern Medical Society.

Chairman.

The President, S. J. K. Kelly, in the chair.

Secretary.

S<sup>r</sup> S. J. K. Kelly, John Brown, D. Findlay, J. G. Wilson, W. H. Mullan,

A. J. Findlay, Geo. Thomson, J. C. Howie, H. L. G. Leach, J. G. Andrew,

J. Hamilton, Ed<sup>r</sup> Mullan, J. H. Murray, R. J. Halliday, M. Black,

J. Eakin, A. Miller, J. H. Nicoll, J. J. Smith, D. H. Gilroy,

J. Gordon, J. W. Jenkins — 23 in all.

The Minutes of the previous meeting were read & approved of.

S. Nicoll

on  
Retention of  
Urine.

S. James H. Nicoll read a paper on the Nature & Treatment  
of the various forms of retention of urine, & showed a number  
of bladder & urethral instruments.

In the discussion which followed S<sup>r</sup> W. H. Mullan,  
Andrew, Hamilton, Ed<sup>r</sup> Mullan, H. Gilroy, & S. J. K. Kelly, took part.  
S. Nicoll replied —

The President intimated that the Directors of the Glasgow  
Training Home for Nurses, having agreed to meet with a  
deputation from the Society, had requested a list of names of  
practitioners willing to support a S.S. branch, & an outline  
of the plan entertained by the Society. The Committee



1893-94

Meeting XVII. (Cont) accordingly, had no alternative but to refer the matter to the Society.

It was agreed that no further action be taken in the meantime.

The President also intimated that the new Seal was now in the possession of the Society.

The consideration of the arrangements for the annual picnic was postponed to the next meeting.

This was all the business.

RK Kelly

1893-94

Meeting XVIII.

11 Bridge Street.

Evening. 17. May 1894.

Chairman.  
Secretary.

Met the Glasgow Southern Medical Society.

The Vice-President, Dr. John Brown, in the chair.

Dr. John Brown, W. McNeill, James Hamilton, G. Gordon,  
J. C. Horrie, H. L. G. Leask, A. S. Kelly, J. G. Andrew, J. H. Meikle,  
D. Macpherson, A. F. Reid, J. A. Aitken, J. W. Jenkins, J. Marshall,  
J. Wright, H. Kelly, A. S. Tindal, D. Tindal. Dr. McNeill, Visitor -  
19 in all.

The Minutes of the previous meeting were read & approved of.

The Chairman assented to a generally expressed wish that  
numbers might be allowed to smoke. The privilege was  
much appreciated.

Dr. James H. Meill received the thanks of the Society for  
showing an infant with congenital absence of the lower end of  
the left fibula.

The Vice-President, for Dr. R. Fullerton, read notes of two cases  
of nasal disease, the one characterized by the prolonged presence  
of a rhinolith, the other by the occurrence of large polypus at  
an unusually early age, showed the respective specimens.

Dr. George Gordon showed a Myoma which had been spontaneously  
effused from its uterus. Dr. Leask raised the question of diagnosis.  
Although the specimen might be a fleshy mole. The history, too,



1893-94

Meeting XVIII  
(Cont.)

pointed in that direction. Dr. Macjilroy Marshall  
were of the same opinion, & advised microscopic examination.

S. A. Brown Kelly exhibited his Torsion Punch, explained its  
application, & referred to the cases for which it was designed.  
He also introduced a patient on whom it had been  
employed with very satisfactory results.

S. J. W. Jenkins exhibited a specimen of Fetal Hydrocephalus,  
read notes of the early diagnosis of that condition by  
abdominal palpation. Dr. Jordan, Morris, Laack, Macjilroy,  
Brown, made some remarks on the case.

Arrangements for the annual picnic were again  
discussed. Apr. Edinburgh, & the Port of Mantieth were  
proposed for visitation. It was agreed to postpone this  
in the next bill, deferring the final decision till  
the 31<sup>st</sup> inst.

This was all the business.

R. Kelly

1893-94

Meeting XIX.

11 Bridge Street.

Wespm. 31<sup>st</sup> May 1894.

Met the Glasgow Southern Medical Society  
The President, S. J. K. Kelly, in the Chair.

Present.

Sr. D. Cooper, W. H. Millar, J. Hamilton, Dr. Black,  
John Adams, D. J. Mackintosh, Horie Geo. Thomson, D. Tindal,  
A. Miller, S. J. Kelly, Jenkins, John Brown, J. T. Smith, S. Gordon,  
R. H. Pary, W. Murray, Macpherson, Reid; J. D. Morton, Visitor,  
20 in all —

S. R. Dr.  
Buchanan  
on the  
Diagnosis &  
Treatment of  
Diphtheria.

The Minutes of the previous meeting were read & approved of.  
S. R. Dr. Buchanan opened a discussion on the Diagnosis  
& Treatment of Diphtheria.

Having described & demonstrated processes of culture  
preparations & microscopically the Bacillus of Klebs, Dr.  
Buchanan dealt with the conditions which favour or retard its  
development, referred to recently obtained experimental evidence  
of the nature & effects of the poison which it produces. The means  
of detecting the presence of the bacillus were carefully detailed, &  
the diagnostic value of the procedure, as exemplified in Dr.  
Buchanan's own practice, made manifest.

Diphtheria, from the present standpoint, is primarily a  
local disease. The various symptoms which attend it are due  
to the action of the toxic products of the bacillus on distant organs.

The therapeutic indications, accordingly, seem to demand



1893-94

Meeting XIX (cont.) the removal or destruction of the membrane, stimulation of the functions of the secretaries, high nourishing diet. 'Pneumothorax' had not yielded the results obtained experimentally on the lower animals.

In the discussion which followed Dr. D. Cooper, J. Hamilton, J. Adams, R. H. Parry, J. J. Smith, D. J. Ingham, H. H. H. H., D. J. H. H. took part.

D. H. H. moved that there be no picnic this year. This was seconded by Dr. D. Cooper. adopted unan. conv.

Owing to the absence of Dr. J. C. Edmiston, the motion on the bill in his name was not considered.

D. H. H. was proposed as a member of the Society by Dr. J. Brown, & R. H. Parry.

This was all the business -

H. H. H.

1893-94.

## Celebration of Jubilee of Society.

Meeting XIII

Jubilee of  
Society -

March 1844 }  
March 1894 }

Windsor Hotel, 250 St. Vincent St.

Glasgow. 15. March 1894 -

On this evening the members with many friends & guests met to celebrate the fiftieth anniversary of the Glasgow Southern Medical Society.

Chairman.

Comptrols.

Sederunt.

The President, Dr. James K. Kelly occupied the Chair;  
Dr. John Brown, Vice-President, & Dr. J. C. Edmiston,  
Treasurer, discharging the duties of Comptrols.

The following members & guests were present: -

Dr. James K. Kelly, President.

Dr. Callender, P. F. R. S. G.

Mr. Hugh Brown, Chairman Royal Infirmary

Rev. Mr. Laifus, Gorbals.

Dr. Douglas Reid, Helensburgh

Dr. McLeitch, Med. Officer. Lanarkshire.

Dr. Munro " Renfrew

Dr. McVail " Dumbarton.

Provost Campbell, Kinning Park.

Dr. John Murray

Mr. J. Cousar.

Dr. Gavin Tennant

Rev. Mr. Ritchie, Langside

Dr. Mayo, Lang.



15 March 1894.

Sederunt.

D. Edward McNeill  
D. Mather, Treasurer.  
Mr. Reid, George A. H. H.  
Mr. Thomas Morrison, Director Samaritan Hospital.  
Mr. W. Norland. Writer  
Mr. John Lawson, Artist.  
D. Ebenezer Duncan. Victoria Infirmary.  
D. Alexander Napier. Victoria Infirmary.  
D. John Dargie, Royal Infirmary.  
D. James Dumas  
D. R. W. Forrest.  
D. W. Carr.  
D. R. Pollok.  
D. Thomas Laffan  
D. Alexander Miller  
D. James Hamilton  
Mr. A. E. Hayland. Victoria Infirmary.  
D. D. C. McVail Royal Infirmary.  
D. David Cooper  
D. W. Ross.  
D. James Erskine.  
D. J. C. Edmiston, Treasurer.  
D. Duncan Macjilroy  
D. John Brown. Vice President  
D. Malcolm Black.  
D. George Halkitt.

15 March 1894.

Sediment.

S. Hugh Kelly.

S. James Finlayson, Western Infirmary.

S. Charles Workman, Royal Infirmary.

S. Charles G. King

S. Archibald Sampson.

S. A. Maithland Ramsay.

S. R. H. Pary. Victoria Infirmary.

S. J. Walker Davis

S. R. Fullerton.

S. A. S. Scindal. Coal Keeper

S. C. E. Robertson.

Mr. Jay Brown

S. John Adams

S. J. G. Wilson

S. J. G. Andrews

S. John F. Smith

S. David McSmith.

S. John Stewart

S. Samuel Sloan

S. Andrew Davidson

S. J. W. Jenkins. Secretary.

S. W. H. Hillier

S. Daniel McNeil.

S. J. C. Horne

S. W. Cullen

S. W. Wallace



15 March 1894.

Sediment.

S. Alexander Robertson, Royal Infirmary.  
S. George Gordon  
S. James H. Nicoll.  
S. A. Johnstone, Belvidere.

Denials.

After a sumptuous dinner indulged in the strains of Mr. Cole's Orchestra, the Secretary intimated that apologies for absence had been received from the following gentlemen:—

Apologies  
for  
absence.

The Lord Provost.

Principal Caird.

The Rev. J. Marshall Lang.

Sir John Stirling Maxwell.

Professor Cairnes.

Professor Macerwen.

Sir W. Renny Watson.

Sir Charles Cameron M.P.

Mr. Cameron Corbett M.P.

Rev. Mr. Rowe, Laureistan.

S. J. B. Russell.

S. Wm. Scott, Rutherglen.

S. Ireland Fergus.

Mr. C. Russell. Ed. Joseph Harold.

S. A. K. Chalmers.

Frederick Dickson

Mr. William Lorne.

15 March 1896

Apologies for  
Absence.

S. John Robertson, Pemberton.

S. James Stinton

W. John Paterson.

S. Moore Thomas.

S. A. Patterson

S. D. N. Knox.

S. James Danks.

S. W. Allan.

The President  
proposes  
The Queen.

The Chairman then called for the Company to respond  
to the toast 'The Queen & Royal Family', which they did  
right loyally.

The Memory  
of the  
Founders.

The next toast which was also given from the Chair  
was 'The Memory of the Founders'. In submitting this  
toast, the President took occasion to depict those  
early members as they have come down to us in the  
history of the Society. The toast was pledged in  
silence.

S. Velloules  
proposes  
The Society.

S. Velloules, President of the Faculty of Physicians &  
Surgeons afterwards gave the toast of the Evening, 'The  
Society'. In doing so he remarked that his knowledge of the  
early days of the Society was derived from the pages of its  
historian, S. Dayrell. It was not every society that had a  
historian, even at its jubilee. Relying on Dr. Dayrell's  
historical narrative, S. Velloules made brief & rapid  
sketches of the original officers of the Society, & especially



15 March 1894

S. Gallwey  
presents  
The Society.

of S. David Campbell, its one 'Simple member'. S. Campbell, however, was not so simple as he appeared to be in the early periods of the Society. For one thing, he invented a wonderful instrument called the potioscope, the endeavored without success to persuade the office bearers who ruled so abundantly over him, as the Chairman had remarked, to allow themselves to be externally interviewed. With others his handshakes were also ineffectual, the glory of his invention was like to fade. It happened, however, that at Peapack Fair he wandered into what were then called 'The Shows', one which would have it one of the entertainers of the public happened to be a sword swallower. Further professional followers the 'Simple member' thought he saw his way to demonstrating the scientific value of the potioscope. Accordingly, he thrust the sword swallower away from the wedding crowd, & suggested that an examination of his stomach by means of the potioscope would procure for him a reputation bounded only by the civilized world. The sword swallower did not rise to the occasion. He stood apart, then declared that he could swallow a sword, but he'd be blanked before he could swallow a trumpet. After some other amusing reminiscences, S. Gallwey proceeded to say that it was impossible to overestimate the good which such a Society as theirs could do. Its members had most worthily carried out the aims of its founders. There were, to promote professional



St. Louis 1894.

friendship, to increase knowledge, ~~the~~ <sup>and</sup> all the professional  
unities of balance that were apt to arise in business  
practice. All knew how well these aims had been achieved.  
Such a Society as there had a great part to play, and did much  
good both to the profession & the public. With the toast he  
completed the name of the Chairman.

The President  
returns  
thanks.

The toast having been pledged with great enthusiasm,  
The Chairman replied.

He rejoined, he said, that their Society had passed through  
all its initial difficulties. It had come through all the  
trials of inquiry and debate, and had now reached a full &  
vigorous manhood. When a Society had reached its prime  
it had proved that it possessed in itself some elements of  
permanence, might look forward to a future still more  
prosperous - but knew the continuation of which was left  
to view in the dim distant future. It was not doubtful to  
any of them that great changes were impending in the  
medical profession - that great change, in fact, was now in  
progress. These changes would affect most powerfully the  
general practitioner. What part would their Society take in  
these? Could it be hoped that at the end of the next fifty  
years its members would look back with the same  
satisfaction as they did at the half century which had  
passed. He thought there was nothing unreasonable in  
entertaining such a hope. He thought, indeed, the likelihood



15 March 1894

was all in that direction. Whatever change might take place, it was very unlikely that they would be revolutionary in their methods, although they might be a radical in their effect as it was possible to imagine. They might confidently expect that their members would not fail to adapt themselves to the passing phases of existence in the future as they had done in the past. Their Society had in it the elements of a permanent existence. It was based not chiefly on Science, not chiefly on intelligence, not at all on self interest. It was based on the human heart, with its broad & generous sympathies, and on that fact that would keep it alive.

D. Duncan  
proposes  
"The Guests".

D. George Duncan then proposed the toast of "The Guests" which was responded to by the Rev. W. Lister of Lauretta Parish, & Mr. Hugh Brown, Chairman of the Royal Infirmary.

The Toast list was now at an end, for the motto of the Evening was Non loquor opus et ambagibus — After an interval the party reassembled & spent the remaining hours in the social & festive manner befitting so auspicious an occasion.

J. Kelly.

Session 1894-95.

Meeting I.

11 Bridge Street.

Glasgow. 4<sup>th</sup> October 1894.

Met the Glasgow Southern Medical Society.

Chairman.

The President, Dr. J. K. Kelly, in the chair.

Secretary.

Dr. J. K. Kelly: J. Richmond: D. Cooper: A. Miller: W. Carr:

A. Rankine: J. F. Orr: R. W. Forrest: J. W. White:

J. Euskinie: A. B. Kelly: J. K. Munn: G. Gordon: E. Duncan:

Edw. Thomson: J. G. Wilson: J. C. Horrie: A. L. G. Laack:

J. L. Staven: Andrew Wilson: W. M. Millan: G. Marshall:

John Brown: James M. Kae: J. C. Edmiston: D. Macgillivray:

A. Napier: E. M. Millan: J. W. Jenkins —

29 in all.

Minutes of  
Meeting  
31<sup>st</sup> May 1894.

The Minutes of the previous meeting were read & approved of.

The President submitted a letter he had received from

Dr. D. Thomas of Valparaiso, one of the first members of the

Society, with reply which he had made. On the motion of

Dr. A. Miller, seconded by Dr. W. Carr, it was unanimously

agreed that both be inserted in the Minutes —

Dr. Thomas' letter is as follows: —

Valparaiso. May 20<sup>th</sup> 1894.

Dr. J. K. Kelly, Glasgow.

Dear Sir, In the Glasgow Herald of 16<sup>th</sup> March, under

Letter from  
Dr. D. Thomas.  
Valparaiso.



1894-95.

Meeting I.

Letter from  
S.D. Thomas  
Valparaiso.

" the heading 'Glasgow Southern Medical Society,' I read an  
" account of the Jubilee Dinner given on the occasion of  
" the 50<sup>th</sup> anniversary of this Institution. & that you were  
" chairman. I write to say to you, Sir, what pleasure the  
" perusal of this article gave me, more especially on  
" reading of the Toast, submitted by you, to the 'Memory  
" of the Founders'.

" It is not often that after 50 years, a Founder is able  
" to rise (as it were from the dead) and return sincere  
" thanks. I am the last living member of these Founders;  
" we were in all, as you state, five in number, - namely  
" Dr. Keach, Dr. Kenzie, Fordie, Campbell, & Thomas. This  
" last named has now the honour of writing to you.

" The short time I had the great privilege of being  
" associated with my four friends, was, I assure you,  
" one of the happiest epochs of my <sup>long</sup> life. Dr. Fallowell truly  
" described the motives of our uniting together, which were, -  
" to promote professional friendship, to increase knowledge,  
" and to allay professional rivalries & jealousies that were  
" apt to arise in business practices, - and these sentiments  
" were loyally carried out by us.

" Any important case which came under the care of any  
" member at our daily meetings was discussed, if necessary,  
" mutual professional help given. It was as the same speaker  
" beautifully observes a Society, 'based on the human heart, & its  
" broad & generous sympathies.' Under these circumstances, you  
" can

Can imagine with what ecstatic pleasure I read of the great prosperity which the 'Glasgow Southern Medical Society' has now attained. I had to leave, in 1845, for this country where I have resided ever since.

The Society conferred upon me the honour of making me the first Corresponding member, as you list, the duties of which, I am sorry to say, I was unable to fulfil, on account of my career in life having been entirely altered on my arrival here. In the year 1869 I paid a visit to Scotland, where the Society honoured me with a picnic at Mearns. I then knew very few of the members whom I met there. In 1887, I was again in Scotland on a visit, & then heard that the 'Glasgow Southern Medical Society' had had their annual dinner. I was indeed sorry that I did not know in time that it was to take place, or I would have had great pleasure in meeting with the members.

I write this to you, Sir, to express my great delight in recalling such pleasing associations, it would be a great pleasure to me. Indeed, if a copy of D. Dougall's history of the Society, mentioned in the article, could be sent to me. My Cousin, D. Messrs Thomas, of the Royal Infirmary, would pay any expenses. I am now in my 77<sup>th</sup> year, hale & hearty, & my memory will be included with my four co-founders later on.

I remain, Dear Sir,

Yours most truly,

D. Thomas."

Address. D. Thomas, Esq. Messrs. Scott & Co.  
Valparaiso, Chile.



1894-95.

Meeting I.

D. Kelly's reply was in the following terms: —

D. I. K. Kelly's  
Reply to  
D. Thomas' letter.

"Crosshill, Glasgow.

2<sup>d</sup> August 1894.

Dear D. Thomas,

It was with great pleasure that I received your interesting letter, which seemed indeed like a voice from fifty years ago. We held no meetings during the summer months, but when we resume in the winter I shall take the first opportunity to read your letter to the members of our Society, & I am sure they will join with me in wishing you the enjoyment of still many years of 'hale shanty' old age.

In the meantime I have got from the Secretary, & send you herewith a copy of D. Dougall's Historical Sketch, which, I am sure you will enjoy. I also enclose a list of our present members which may be interesting to you, though I fear there are very few names that you will recognize.

In regard to yourself I may just mention that you were elected a member on 28<sup>th</sup> August 1844, being the first member admitted after the Society was formed — its present title The Glasgow Southern Medical Society having been adopted on the previous day, 27<sup>th</sup> August 1844 —

I cannot conclude without expressing my own, & I think I may add our Society's heartiest desire for your continued welfare.

I am Ever yours truly

J. K. Kelly."

The Treasurer then submitted his statement for Session 1893-94 showing a balance in favour of the Society of £4.13.1, exclusive of arrears to the extent of £7.

D. E. McMillan moved that the Report be adopted. This was seconded by D. E. Duncan, & carried by acclamation.

Election  
of  
Office-Bearers  
for Session  
1894-95.

The following were nominated as Office-bearers for the ensuing year & elected unanimously contradictorily : —

President . . . . . John Brown M.D.

Vice-President . . . . . Alexander Rankin M.D.

Treasurer . . . . . J. C. Edmiston, L.F.P.S.G.

Secretary . . . . . T. W. Jenkins M.A. M.D.

Editorial Secretary . . . . . W. McMillan M.B.

Seal-Keeper . . . . . A. S. Tindal M.D.

Court Medical . . . . . Dr J. K. Kelly : A. Napier :  
J. L. Stewar : LaPraik : Jamieson.

Governor of Victoria Infirmary . D. E. McMillan.

Extra Members of Council — On a vote being taken the following were appointed : —

Dr R. W. Forrester : C. E. Robertson : J. G. Wilson.

Election of  
New Members —

Mr. R. Barclay Ness, M.B., was elected an ordinary member of the Society.

It was left with the Council to arrange for the Annual Dinner to be held on the 18<sup>th</sup> inst.



1894-95

Meeting I.

D. J. W. Jenkins gave notice of the following motions:—

(a) That it be the duty of the Secretary to preserve a copy of all <sup>every notice</sup> papers issued by the Society, & all letters received therein in his official capacity, & at the end of each session to have these bound into a volume, the same to become the property of the Society.

(b) That it be the duty of the Editorial Secretary to transmit a short account of the proceedings of the Society, so far as there may be of general interest, to the Editor of the Glasgow Medical Journal, & to furnish the Secretary with a reprint of the same to be included therein in the volume above described—

Nomination  
of New Members.

The candidates were nominated for membership:—

a) James Wardrop, L.R.C.P.S. Ed: L.F.P.S.G. / Balmoral Crescent.  
proposed by D. E. Duncan: seconded by D. R. H. Parry.

b) Douglas Russell, M.B., Langside.

proposed by D. J. W. Jenkins: seconded by D. W. Dr. Millan.

c) James Robertson M.B. 20 Abbotsford Place.

proposed by D. W. Dr. Millan: seconded by D. J. W. Jenkins.

d) W. J. Nicholson M.B. Victoria Infirmary.

proposed by D. E. Dr. Millan: seconded by D. J. H. MacCall.

e) J. Taylor Young, M.B. Pollok St.

proposed by D. W. Dr. Millan: seconded by D. J. C. Horrie.

D. R. J. Halliday, Lockport, N. Y., intimated that he wished to  
be elected a Corresponding Member of the Society.

This was all the business.

J. Kelly,



1894-95.

Meeting II.

North British Hotel. George Square  
18<sup>th</sup> October 1894.

Annual  
Dinner.

Met the Glasgow Southern Medical Society

Chairman.

The President, Dr. John Brown, in the chair.

Securities: -

Dr. John Brown, Dr. McNeillan, W.L. Reid, R.W. Forrest,  
J.C. Edmiston, A. Rankin, J.L. Stavin, J.K. Kelly, S. Sloan,  
W. Carr, W. Wallace, J. Erskine, J.K. Innes, J. Forrest, J. Hamilton,  
D. Gouge, A.R. Carmichael, W. McNeillan, A.B. Kelly, J.G. Wilson,  
W. Walls White, Dr. Knight Wilson, Dr. Black, J.W. Allan,  
C.E. Robertson, J.W. Jenkins.

Guests: - Mr. W. Norland, Mr. James Brown, Dr. D. Macphail,  
Supt. Lt. W.D. Erskine, Dr. J. Innes, Dr. J. In. H. Kerr,  
Dr. W. Nicholson, Dr.

Toast list

34 in all -

'The Queen'.

After an excellent dinner, the toast of 'The Queen' was  
proposed by the President, & duly honoured.

'The Society'.

Dr. A. Rankin gave the toast of 'The Society'. Brief acknowledgments  
were made by the President.

'The Guests'.

Dr. McNeillan submitted the toast of 'The Guests' which  
was responded to by Mr. W. Norland.

The rest of the evening was devoted to music & social  
significance. Dr. J.K. Innes, A.B. Kelly, W. McNeillan, Carr,  
Dr. Black, C.E. Robertson, J. Forrest, W. Wallace, Carmichael,  
Supt. Lt. Erskine, & Mr. James Brown, contributed in as small  
degree but all were unanimously pronounced to be a most

Enjoyable evening.

The undersigned were nominated for membership: -

J. H. W. Kern, Esq. D: Parkely Terrace.

proposed by S. J. Forrest: Seconded by S. J. W. Allan.

Wright, Esq. D: Shawlands.

proposed by S. E. H. Kellum: Seconded by S. John Brown.

This was all the business.

John Brown



1894-95.

Meeting III.

11 Bridge St. Glasgow.

17 November 1894.

Met the Glasgow Southern Medical Society.

Chairman.

The President, Dr. John Brown, in the Chair.

Secretary: -

Dr. John Brown, J. C. Edinister, D. Tindal, J. K. Kelly,  
A. Rankin, W. H. Millar, A. T. Tindal, J. Forrest, J. C. Horrie,  
J. Hamilton, J. M. Stalk, J. F. Gray, John Stewart, J. Grant, John,  
A. Tompkins, A. W. Montgomery, D. C. H. Vail, M. Black, D. M. Knox,  
A. Patterson, F. K. Moore, D. Macpherson, T. W. Jenkins -  
Dr. R. Kennedy, D. Macartney, A. H. Holland, Moffat; Visitors.  
27 in all.

The minutes of the previous meetings were read & approved of.  
Dr. John Brown showed a case of Congenital Deformity of both  
femurs.

Dr. J. K. Moore showed two patients, brothers, with Ichthyosis, and  
made some remarks on that condition.

Dr. A. Rankin showed a case of Congenital malformation of both  
knee joints.

Dr. J. Forrest introduced a patient in whom a second attack of  
Typhoid Fever had been followed by Progressive Muscular Atrophy,  
and made some remarks on the case.

Dr. Alexander Patterson gave an account of Eighteen Years' Surgery  
in the Western Infirmary, Glasgow.

Dr. Knox, Dr. Vail, Hamilton, the President congratulated Dr.  
Patterson on his brilliant record, thanked him for bringing it

before the Society.

D. Patterson briefly replied.

Election of  
new members.

The following gentlemen were elected members of the Society: —

Mr. Douglas Russell, Esq. D. Langside

\* Mr. James Wardrop, L.R.C.P.S. Ed. Crosshill: resigned *WB*

Mr. James Robertson, Esq. D. Abbotsford Place.

Mr. W. J. Nicholson, Esq. D. Victoria Infirmary.

Mr. J. Taylor Young, Esq. D. Pollock St.

Mr. J. M. R. Kerr Esq. D. Baskely Terrace.

Mr. Wright, Esq. D. Howlands.

D. R. J. Halliday, Esq. Gilchrist, was elected a Corresponding  
member of the Society.

The Council decided to hold a meeting of the Society on the 8<sup>th</sup> inst.  
for the dispatch of business.

This was all the business —

John Brown

\* Note was subsequently received from Mr. James Wardrop, L.R.C.P.S. Ed.  
intimating his resignation.

*WB*



1894-95.

Meeting IV.

11 Bridge St. Glasgow.

8 November 1894.

Met the Glasgow Southern Medical Society.

Chairman.

The President, Dr. John Brown, in the chair.

Order of the day:

Dr. J. Brown, J. Hamilton, J. C. Edmiston, C. E. Robbison,

W. Wallace, J. Gordon, J. Richmond, E. McMillan,

J. C. Horrie, J. W. Thomson, A. S. Tindal, H. Kelly,

J. Russell, A. Rankin, W. McMillan, J. W. Jenkins.

Roll call.

Minutes of  
previous meeting  
& Election of  
New Members.

The Minutes of the previous meeting having been read Dr. J. C. Edmiston moved their adoption except that relating to the election of new members which he objected on the ground of irregularity of procedure. Dr. C. E. Robbison seconded, & this became the finding of the meeting. It was therefore agreed to submit the nominations to individual ballot. This having been done, the several gentlemen were elected members of the Society.

Report of  
Pharmaceutical  
Prosecution  
Defence  
Committee.

Dr. James Hamilton submitted a report of the work done by the Pharmaceutical Prosecution Defence Committee. Dr. E. McMillan moved, & Dr. A. Rankin, seconded, that the report be adopted. To this the Society unanimously agreed. The thanks of the Society were awarded to the Committee & to Dr. Hamilton in particular for the arduous labour they had undertaken so well performed.

The Committee was therefore discharged.

Resignations.

The Secretary intimated that letters of resignation had been received from the following members; - D. W. Fenwick, J. Stewart Campbell, J. Turnbull Smith, J. A. Garland, Robert Law.

After some discussion it was resolved to accept these resignations, except that of D. Fenwick pending further communication. The election of a member to the Court Medical was therefore deferred.

Motions  
confirming duties  
of Secretary &  
Editorial  
Secretary -

D. Graham then brought forward the two motions of which he had given notice. The first, viz. 'That it be the duty of the Secretary to preserve a copy of every notice issued by the Society, & all letters received by him in his official capacity, at the end of each session to have them bound into a volume, the same to become the property of the Society', was unanimously adopted. The second, viz. 'That it be the duty of the Editorial Secretary to transmit a short account of the proceedings of the Society, so far as there may be of general interest, to the Editor of the Glasgow Medical Journal, & to forward the Secretary with a reprint of the same to be included by him in the volume above described', with the addition of the words "or other medical journals" (after Glasgow Medical Journal), was by ballot declared to be the finding of the meeting.

This was all the business.

John Brown



1894-95

Meeting V.

11 Bridge Street, Glasgow

15 November 1894.

Met the Glasgow Entomological Medical Society.

Chairman.

The President, Dr. John Brown, in the chair.

Secretary.

Dr. J. Brown, J. K. Kelly, J. Gaister, W. H. Millar,

A. S. Tindal, J. G. Allan, D. H. Crovie, J. C. Edmiston,

M. Black, J. C. Horrie, Taylor Young, H. Lafrank,

E. H. Millar, D. Campbell Black, J. Erskine, J. S. Wilson,

D. Tindal, J. L. Stevens, W. Watson, J. G. Jenkins.

Spent all.

The minutes of the previous meeting were read & approved.

Dr. Erskine's resignation was intimated & accepted.

Dr. J. L. Stevens read an account of the life & works of John Reid, Surgeon, Glasgow.

Dr. Campbell Black, E. H. Millar, Lafrank, & J. Gaister

Spoke of their acquaintance with Dr. Reid, & the part he played in the earlier medical history of Glasgow.

A hearty & unanimous vote of thanks was awarded Dr. Stevens for his highly interesting communication.

This was all the business.

John Brown

1894-95.

Meeting VI.

The University. Glasgow.

29. November 1894.

Met the Glasgow Southern Medical Society.

Chairman

The President. Dr. John Brown in the Chair.

Secretary.

Dr. John Brown, Dr. Galt Anderson, Dr. Gullen, Dr. Miller, Telford,  
A. Brown, H. Kelly, J. C. Harris, J. C. Christie, Taylor Young, James Orr,  
Wright, J. K. Kelly, G. Marshall, W. Mitchell, A. D. Kelly, Geo. Thomson,  
J. Richmond, H. Black, J. K. Jones, W. G. White, J. W. White, J. G. Andrew,  
D. H. Hunt, Lewis, Fullerton, Walter Brown, F. Fergus, J. Stewart,  
Peden, Halkett, J. Hamilton, A. Rankin, J. Dickson, G. Watson,  
Leach, J. Ross, J. G. Wilson, R. M. Buchanan, Dr. Kirkpatrick —  
Prof. H. Kendrick, Dr. Sully, Harris, Jack —  
43 in all.

Demonstration

by Professors  
H. Kendrick.

Professor H. Kendrick, who had kindly invited the members  
of the Society to spend the evening in his laboratory, demonstrated  
the most recent advances in the construction of the microphone.

Other matters of physiological interest were explained by Dr. Sully,  
Harris.

On the motion of Dr. John Brown, Professor H. Kendrick was  
heartily thanked for his address and demonstration.

This was all the business.

John Brown



1894-95.

Meeting III.

11 Bridge St. Glasgow.

13. December 1894.

And the Glasgow Southern Medical Society.

Chairman.

The President in the chair.

Secretary: -

D. John Brown, J. C. Edmiston, J. C. Horie, W. L. White,

J. Hamilton, J. K. Kelly, R. H. Parry, A. S. Tindal.

Sci all.

\* D. R. H. Parry showed the following specimens: (1) Epithelium of Paris; (2) Tubercle granules of hip joint from a patient who died of meningitis; (3) Paris. Testes removed from an adult who had always passed as a female; (4) Sarcoma of Parotid Gland.

D. J. C. Edmiston read notes of a case of Foreign Body in the Stomach.

D. J. C. Horie described a case in which he had removed a dental plate from the oesophagus by coin catcher, and made some remarks on foreign bodies in the alimentary canal.

Election of  
Members of  
Court Medical.

D. James Hamilton nominated D. W. L. White for the vacancy in the Court Medical. D. A. S. Tindal seconded, and D. White was unanimously appointed.

The following gentlemen were elected by ballot members of the Society, viz: -

New members:-

Mr. J. M. N. Kerr, M.D. Denbigh, Denbigh.

Mr. J. Wright M.D. Stanlands

Mr. J. Wylie M.D. 64 Kelvingrove St.

S. G. Dalfour Marshall, 13 Woodside Crescent.

} Names omitted from  
Bill of Meeting III:  
to printer 1. 11. 74:  
have second ballot.

This was all the business.

John Brown



1894-95

Meeting VIII.

11 Bridge Street.

Glasgow. 10. January 1895.

Chairman.

Secretary.

Met the Glasgow Southern Medical Society,

The President in the Chair.

D<sup>r</sup> John Brown, A. Napier, D. Tindal, A. Rankine, J. Wylie,

A. S. Tindal, J. W. Allan, J. C. Horrie, J. Russell,

W. H. Millan, J. Forrest, J. W. Jenkins - 12 in all.

Resignation of  
Prof. H<sup>c</sup> Kendrick.

Notice of Motion.

The Minutes of the previous meeting were read and adopted.

Intimation was made of the resignation of Professor H<sup>c</sup> Kendrick.

D<sup>r</sup> John Brown gave notice of a motion to elect D<sup>r</sup> H<sup>c</sup> Kendrick an honorary member of the Society.

D. A. Napier:

Removal of  
Superfluous Hairs  
by Electrolysis: and  
Bacteriological  
Demonstrations.

D. A. Napier brought under the notice of the Society the subject of Superfluous Hairs, their removal by Electrolysis, giving details of the mode of treatment & the apparatus he employed. Thereafter he demonstrated microscopic preparations of the following microorganisms, 13. Gonococcus, Bacillus diphtheriae, Diplococcus from a case of Exfoliative dermatitis following Pemphigus, Diplococcus associated with Pneumonic Eudaimonia in Influenza, Haematogoon Malariae.

D<sup>r</sup> J. C. Horrie, J. Russell, J. Forrest, W. H. Millan, & J. Brown thanked D. Napier for his interesting demonstration.

D. Napier briefly replied.

This was all the business.

Wm Brown



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Meeting IX.

11 Bridge Street.

Glasgow. 24. January 1895.

Met the Glasgow Southern Medical Society.

Chairman.

The President in the Chair.

Secretary.

Dr. John Brown, A. Miller, S. Ralford Marshall, J.C. Horrie,  
James Hamilton, Chas. Thomson, G. Gordon, A. Rankin,  
Ed. Gibson, Ed. L. Oliphant, J. R. James Kerr, Dr. Black,  
A. Davidson, D. Tindal, W. Watson, Dr. Neil, J. Forrest,  
W. R. Mullen, J. W. Jenkins; A.D. Royd (Visitors).

20 in all.

Minutes.

The minutes of the previous meeting were read and adopted.

Dr. W. Watson  
on Puerperal  
Fever:—

Dr. W. Watson read a paper on Twenty six Cases of  
Puerperal Fever which he had had under his care in  
Belvidere Hospital. The results which he had  
obtained from Caesarean section were exceedingly  
satisfactory, and he considered the leading therapeutic  
indication in all such cases.

Discussion.

In the discussion which followed Dr. D. Tindal, A. Davidson,  
Royd (Visitor), Dr. Black, Oliphant, A. Rankin, Gordon,  
Thomson, Hamilton, Horrie, S. Ralford Marshall, Mullen,  
John Brown, took part.

Dr. D. Tindal

Dr. D. Tindal referred to the frequent occurrence of pyrexial  
symptoms in first labours, presumably from bruising of

the salient facts, advocated douching in such cases.

D. Mr. Black proposed to use the syringe instead of the Annette.

He also pointed out that in fatal cases <sup>which had</sup> occurred in the Maternity Hospital, the uterus was found quite empty.

D. Oliphant dispensed with preliminary douching; injected the uterus with Iodoform & Mercurochrome when special symptoms arose, reserving Kinetin for a later stage. He prepared the 'Gyn' Annette & other instruments.

D. Rankin spoke highly of Early Annetting.

D. J. Dalfoe Marshall referred to the aseptic condition of the vagina before labour, the uselessness of preliminary douching. He had not observed the autogenous infection in puerperal cases which D. Watson had described. He agreed Papanicolaou. There was to be gained from the Pulse than the temperature.

D. Watson briefly replied.

The Secretary intimated that the following gentlemen had been proposed for ordinary membership: -

- (1) W. J. Maclean, M.A., M.D. 24 Francis St.  
Proposed by D. R. Pollok.  
Seconded by D. J. G. Jenkins.
- (2) W. E. Gibson, M.D. 30 Carrington St.  
Proposed by D. W. Watson.  
Seconded by D. A. Miller.

This was all the business.

John Brown



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Meeting X.

11 Bridge Street

Glasgow. 7. February 1895

Met the Glasgow Southern Medical Society.

Chairman.

The President in the chair.

Secretary.

Dr. John Brown, J. Eskin, A. Robertson, Tompkins, A. Rankin,  
J. C. Howie, W. Wallace, W. R. Miller, W. H. D. Russell, Allan,  
J. Russell, A. Kelly, Jenkins.

14 in all.

Election of  
Honorary &  
ordinary  
members.

The Minutes of the previous meeting were read and adopted.  
The Honorary Membership of the Society was conferred upon Professor  
J. G. Macdonald.

Messrs. Ed. Gibson and J. Macdonald were elected ordinary members  
of the Society.

D. Eskin, on  
the Glasgow  
Hospital System.

D. James Eskin read a paper entitled 'The Hospital of the Glasgow  
Hospital System, the relation of that System to the medical  
profession'.

Adjournment  
of debate.

After some remarks from the Chairman D. J. Russell moved  
the adjournment of the debate on the grounds of the small  
attendance, the importance of the Subject; others were agreed to.  
It was also deemed advisable that D. Eskin's paper should  
be printed & placed in the members' hands at an early date.

D. John Brown proposed D. A. Wilson, & R. Macdonald for membership.  
This was all the business.

John Brown

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Meeting XI.

11 Bridge Street. Glasgow.

21<sup>st</sup> February 1895.

Met the Glasgow Southern Medical Society.

Chairman.

The President in the Chair.

Secretary.

D<sup>r</sup>. John Brown, A.S. Tindal, A. Rankin, B. Marshall, Howie.

The Minutes of the last meeting were read & approved of.

Election of  
New Members.

Messrs J. Allan Wilson, & Robert Murdoch were unanimously  
elected ordinary members of the Society.

D<sup>r</sup>. S. Tindal moved & D. Rankin seconded, that D. John Brown's  
paper be postponed to a future meeting of the Society. This was  
agreed to.

This was all the business —

John Brown



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Meeting XII.

11 Bridge St. Glasgow

7<sup>th</sup> March 1895

Met the Glasgow Southern Medical Society,  
The President in the chair.

Present.

D<sup>r</sup>. John Brown, A. Rankin, A. S. Nisbet, R. Clair Gray, W. Thomson,  
Howie, Richmond, J. Hamilton, Jenkins, Murdoch.

The Minutes of the previous meeting were read and adopted.

X  
D<sup>r</sup>. A. Rankin submitted a report of his work at the Glasgow Lamentation  
Hospital for women during 1894.

A discussion followed in which D<sup>r</sup>. Thomson, Hamilton, Howie,  
R. Clair Gray, Richmond, J. Brown, & Jenkins took part.

D<sup>r</sup>. Rankine briefly replied.

This was all the business -

John Brown

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Meeting XIII.

11 Bridge Street, Glasgow.

21<sup>st</sup> March 1895.

Met the Glasgow Southern Medical Society.

The Vice-President in the chair.

Present.

D<sup>r</sup> A. Rankin, Mailland Ramsay, Douglas Russell, Messrs Kerr.

A.S. Finckel, D. Finckel, Jno. Thomson, W. H. Killan, J.C. Horrie,

Mr. Gilroy, Jenkins - D<sup>r</sup> Leslie Buchanan & Rossan, Visitors.

The Minutes of the previous meeting were read and adopted.

D. Mailland Ramsay demonstrated by means of lantern slides the normal & pathological appearances of the nasal passages & described the various diseases to which these are subject, & their appropriate treatment.

D<sup>r</sup> Horrie, Mr. Gilroy, Jenkins, Mr. Killan & Rankin expressed

their high appreciation of D<sup>r</sup> Ramsay's demonstration.

D. Ramsay briefly replied.

This was all the business.

John Brown



1894-95

Meeting XIV

Royal Infirmary. Glasgow.

4. April 1895.

Met the Glasgow Southern Medical Society.

The President in the Chair.

Present.

Dr. John Brown, W. H. Millar, R. D. Nees, Arch. Brown, J. D. Trindal, Chas. Thomson, J. C. Horrie, J. W. Allan, W. Carr, Dr. Thomas, J. Forrest, J. K. Murray, Dr. Middleton, Jenkins.

Also: W. R. Hunter, J. D. Stevens, J. H. Donald, W. G. Faulds, J. Rowan, W. C. Murray, J. Maclean, W. S. Giff, Visitors.

Clinical  
Demonstration  
by Dr. J. S.  
Middleton.

Dr. J. S. Middleton brought under the notice of the Society a number of cases from his wards illustrative of Raynaud's disease, Progressive muscular atrophy, Leukæmia, Atetosis, Addison's disease -

On the motion of the President, a hearty vote of thanks was awarded to Dr. Middleton for his interesting demonstration.

Dr. D. Trindal proposed a similar vote to the Directors of the Infirmary & Dr. James Thomson for their kindness in receiving the Society.

Dr. Middleton - Thomson briefly replied.

This was all the business.

John Brown

1894-95

## Meeting XV.

11 Bridge St. Glasgow

18. April 1895

Met the Glasgow Southern Medical Society.

Chairman.

The President in the Chair.

Secretary.

D. John Brown, E. Duncan, Edmonstone, Horrie, Murdoch, Hamilton, Rankin, McIlvenny, Mr. Thomson, D. Tindal, H. Tindal, Miller, MacKie, Jenkins.

The Minutes of the two previous meetings were read and adopted.

A communication from the Glasgow Eastern Medical Society was read to the meeting, proposed for further consideration to the Council.

Fraser  
Specimens.

D. H. Tindal showed an eight-months foetus with incomplete closure of anterior abdominal wall & protrusion of viscera. Full account of the abnormality was promised later.

On the recent  
Epidemic of  
Influenza.

D. E. Duncan opened a discussion on the recent epidemic of Influenza.

He regarded Pfeiffer's Bacterium as the cause of the malady, referring to its distinctive features, mode of development, what period of incubation. Infection was by personal contact. Prevention practically impossible. The various types of the disease were described, the predominance of nervous symptoms in the earlier, of catarrhal in the later, stage of the recent epidemic, noted. On the whole the disease was much less severe than in 1889-90. Local Neuralgias, protracted weakness were the most common Sequelae. Antidotes of distressing symptoms was obtained by Salicylic acid, Antipyrin, Phenacetin, Salicylate of Soda &c.



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Meeting XV  
(Cont.).

Discussion on  
recent  
Epidemic of  
Typhus.

In the discussion which followed D. M. Kellas, D. Dundas,  
Hamilton, Horrie, Edmiston, & J. Brown took part.

D. Kellas had found the Anti-toxin powder useful; & had noted as  
sequelae Typhoid, Intest. Stenosis of the Liver, Subacute Pseudo-  
intestinal Catarrh, Acute Pharyngitis, Otitis media, Melancholia,  
& Albitis.

D. Hamilton was sceptical as to the great prevalence of Typhus, &  
thought many of the cases so named were really ordinary cases of  
Bronchitis & Pneumonia. He ascribed the high death rate to the  
severity of the winter.

D. Edmiston, speaking from personal experience, described the sudden  
onset of Shivering, malaise, headache, pain in the back &  
limbs, which most regarded as characteristic of Typhus.  
In his case it was followed by Rheumatic Fever.  
In others, he had noted the occurrence of localized pneumonic  
conditions, sometimes of very short duration.

D. Duncan briefly replied.

Notice was given that arrangements had been made for members  
of the Society to pay a visit on the 25<sup>th</sup> inst. to the new Lighthouse works  
at Dalmarroch.

This was all the business.

John Brown

1894-95

Meeting XVI.

25 April 1895.

On this day the Society visited the Sewage Purification Works at Dalnamock.

The following were present: -

Mr John Brown,	J. Glaister.	D. Macgillivray.
Strait Nairns,	J. Garay.	J. S. Blackwood.
R. Pollock.	J. Hamilton.	J. L. Stovam.
A. Cunningham.	W. Ross.	C. Workman.
J. Lafrank,	J. Eukins.	S. P. Clark.
A. Kellas,	A. McIndoch.	A. Templeton.
J. Walls White,	J. C. Drummond.	R. A. Service.
A. R. MacGowan.	G. Marshall.	J. Wright.
C. E. Robertson.	J. Adams.	J. Russell.
J. G. Wilson,	D. M. Smith.	J. Fyfe Orr.
J. W. Jenkins.	J. K. McInnes.	W. H. Hallan.
D. M. Nicol.	J. C. Horrie.	J. W. Thomson.
J. Crawford.	A. Robertson.	J. W. White.
J. A. Ritchie.	A. F. Reid.	

The various departments were visited under the guidance of Mr. Thomas Melvin, Manager of the works, who explained at each stage the mode in which the sewage was dealt with.

At the conclusion, words of thanks were given to Councillor Garay who had interested himself in obtaining permission for the Society to visit the works, & to Mr. Melvin for his courtesy in receiving them. D. Garay Mr. Melvin briefly replied.



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Meeting XVII.

11 Bridge Street.

Glasgow. 2<sup>nd</sup> May 1895.

Met the Glasgow Southern Medical Society.

The President in the chair.

Present.

D. John Brown, J. C. Edmiston, D. Tindal, G. H. Killan, J. Hamilton,  
J. Russell, J. C. Horrie, J. Forrest, A. Rankin, J. K. Kelly, J. Eskinie,  
J. W. Jenkins.

The minutes of the two previous meetings were read & adopted.

B. D. T.

D. D. Tindal described at considerable length a visit he had made to Carlsbad. The physical & chemical properties of the various salts were noted, & the various medical conditions benefited by them. Photographs & various preparations of the Salts & other objects of local industries were exhibited. Reference was also made to the hospitals of Carlsbad, & their high percentage of cases of Gallstones & Diabetes mellitus. The paper contained a full account of the different 'cases', the modes of cure, & the results obtained.

D. J. K. Kelly, Hamilton, Horrie, & Eskinie thanked D. Tindal for his interesting paper.

This was all the business.

John Brown

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Meeting XVIII.

11 Bridge Street.

Glasgow. 16. May 1895.

Met the Glasgow Southern Medical Society.

The President in the chair.

President.	D. J. Brown	J. Wylie	J. C. Edmiston	D. Macpherson
	A. Rankin	W. McMillan	Rev. Thomson	J. Siskine
	Service	J. C. Howie	Workman	J. Hamilton
	C. E. Robertson	J. V. Wallace	J. L. Stearns	M. Black
	J. Forrest	Hendoch	Marshall	H. S. David
	J. G. Wilson	J. Wright	J. Russell	J. J. Young
	J. W. Jenkins			

Discussion on  
Resolutions of the  
Eastern Medical  
Society.

The Minutes of the previous meeting were read and adopted.

Certain Resolutions emanating from the Glasgow Eastern Medical Society, printed in the Billet calling the meeting were discussed by the Society substantially as follows:—

First,

§i.

Section (a) of the First Resolution, viz. "That if the Fiscal, or his representative, asks any medical practitioners for information regarding suspicious deaths or accidents, no information be given unless requested in writing, fee for which to be one guinea," met with general approval.

§ii.

Section (b), viz. "That the medical practitioners who first saw deceased, ought to be conjointed with the official post-mortem examinations, fee for which to be one guinea," was rejected, Six

Vote



voting for, sixteen against its adoption.

Second.

The Second Resolution, viz., "That attendance on all street accidents" (this including close or stair accidents) whether the medical practitioner is called in by a citizen or a policeman, be paid for by the Commissioners," was approved of, Eighteen voting for, five against it.

Third.

Section (a) of the Third Resolution, viz. "That the English and Irish Parochial Surgeons being dismissible by the Local Government Board only, it is desirable that the Scotch Surgeons be put upon the same footing" was unanimously agreed to: and  
 § i. "Certificates, and be paid for it by the Parochial Board" was accepted by a majority; sixteen voting for, six against it.  
 § ii. Section (b), with slight verbal alteration, viz., "That in cases of lunacy, the patient's medical adviser sign one of the

Fourth.

The Fourth Resolution, viz., "That all Certificates of death should be paid for," was adopted *nomine Contradictoris*.

Fifth.

The Fifth Resolution, viz., "That Certificates required by the School Board from medical practitioners be paid for by the Board," was adopted, only five voting for its rejection.

Sixth.

The Sixth Resolution, viz., "That dispensary treatment should not be administered so indiscriminately as at present" met with unanimous approval.

Seventh.

Section (a) of the Seventh Resolution, viz., "That our Society fix the minimum fee per member per annum at Five shillings" — this referring to Club Societies — was rejected by a majority, four voting for, thirteen against it: whereupon,

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§ ii. Section (b), viz., "That Juvenile Societies be at the same rate or higher," was withdrawn from discussion.

At this stage the meeting was adjourned —

John Brown

Meeting XIX.

11 Bridge St.

Glasgow. 30. May 1895.

Met the Glasgow Southern Medical Society.

The President in the Chair.

Present: Dr. J. Brown, C.E. Robertson, W. Carr, Workman, J. L. Steven, J. Forrest, M. Black, A. Miller, W. M. Millar, J. J. Young, J. Russell, D. Macpherson, Murdoch, Jenkins — J. J. Craig, Visitors.

The minutes of the previous meeting were read & agreed to.

It was decided that the annual picnic should be held at Ardross as the 13. prox. in conjunction with the Eastern Medical Society. A Committee, comprising the President & Secretary of both Societies, Dr. W. M. Millar & J. Forrest, was appointed to make the necessary arrangements.

Eighth.

The discussion on the Resolutions of the Eastern Medical Society was resumed.

The Eighth Resolution, viz., "That our Society should use its influence in endeavouring to throw open to all registered practitioners the election of all the members of the General Medical Council" was rejected.



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This concluded the consideration of the Eastern Medical Society's Resolutions.

Supplementary Resolutions: -

First,

The following Supplementary Resolutions were adopted by the Society. "That all medico-legal post-mortem examinations should be conducted by two inspectors," and "That arrangements should be made to give timely notice of all such post-mortem examinations": moved by D. Workman, seconded by D. J. L. Stevens.

Second,

"That the Club-system should be discouraged, & that the total abolition of that system should be the aim of the Society," moved by D. C. E. Robertson, seconded by D. G. McKinnell.

Third,

"That the number of direct representatives of medical practitioners in the General Medical Council be largely increased - the precise number to be determined by a Committee of the Society to be hereafter appointed; - that the latter consider the question of the expenses of the Council being partly borne by the corporate bodies thus represented": moved by D. J. L. Stevens, seconded by D. A. Miller.

Final

Resolution:

D. J. L. Stevens then moved "That a Committee be appointed to summarise the results of the Society's deliberations upon the Resolutions of the Eastern Medical Society, to consider what further action can be taken, and to submit a report to the Society at the next meeting." This was seconded by D. C. E.

Robertson, and adopted by the Society, whereupon, D. John Brown, J. G. Edmondson, J. McKinnell, J. L. Stevens, C. Workman, A. Rankin, C. E. Robertson, & J. W. Jenkins, with D. Brown as convenor, were appointed members of Committee.

This was all the business.

John Brown

1894-95

Meeting XX.

Adelphi, Loch Lomond

13<sup>th</sup> June 1895.

Met the Glasgow Southern & Eastern Medical Societies,  
Dr. George Mathew, President of the latter in the chair.

Present—

Dr. Mathew, J. Brown, Douglas Reid, Sewell, E. Duncan,  
C. Pinkerton, A. Patterson, Service, Cox, A. Rankin,  
R. Pollok, A. Robertson, Scott, J. Wilson, J. Macgregor,  
A. F. Reid, Macjilray, Carr, J. R. Buchanan,  
M. Black, J. W. Allan, Middleton, H. Wilson, J. W. Shi,  
John Knight, J. Dorras, J. Craig, C. E. Robertson,  
James Dunlop, P. A. Docherty, J. A. Wilson, J. P. Granger,  
J. W. Mathew, E. L. March, J. G. Anderson, W. M. Millan,  
J. W. Jenkins.

In all 37.

As previously arranged, the Members left Queen St.  
Station, Glasgow, at 11.5 A.M. & proceeded to  
Adelphi, via Balloch & Loch Lomond: the return  
journey being made by the new West Highland  
Railway.

Arrived at Adelphi, a photograph of the company was  
taken by Dr. James Dunlop (Dormi-stair), immediately  
afterwards, dinner was served.

After dinner, the Chairman proposed 'The Queen', &  
the toast was duly honoured.

over



1894-95.  
Meeting XX

He then gave in a few eloquent words 'The two Societies  
coupling with the toast the names of S. John Brown,  
S. James Craig: Suitable vicarious enjoyment was  
made of both.

S. Mother then proposed the health of S. Jenkins,  
the latter thanking the Company for the honours  
they had done him.

After a few hours pleasantly spent around Redline  
the Company returned home by the West Highland  
Railway, all agreeing that the Session of  
1894-95 had been brought to a happy &  
auspicious End.

John Brown



